



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**MIKE BOST FOR CONGRESS COMMITTEE**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	217463.19	694364.26
(b) Total Contribution Refunds (from Line 20(d)) .....	2350.00	4100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	215113.19	690264.26
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	115920.24	382990.61
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1325.43
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	115920.24	381665.18
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	741402.92	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**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 3 (Revised 05/2016)

Write or Type Committee Name

**MIKE BOST FOR CONGRESS COMMITTEE**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2021 To: M M / D D / Y Y Y Y 12 / 31 / 2021

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	67615.00	302805.00
(ii) Unitemized .....	14348.19	52934.26
(iii) TOTAL of contributions from individuals .....	81963.19	355739.26
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	135500.00	338625.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	217463.19	694364.26
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	1310.29
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	1325.43
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	27.16	89.40
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	217490.35	697089.38

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 108

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	115920.24	382990.61
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	2350.00	3550.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	550.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2350.00	4100.00
21. OTHER DISBURSEMENTS .....	5000.00	43025.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	123270.24	430115.61

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	647182.81
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	217490.35
25. SUBTOTAL (add Line 23 and Line 24).....	864673.16
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	123270.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	741402.92

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

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

FOR LINE NUMBER: PAGE 5 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**ASBERY, DAVID, S, DR.,**

Mailing Address 8 CUSUMANO PROFESSIONAL PLAZA

City MOUNT VERNON State IL Zip Code 62864-6736

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

Name of Employer ASBERY AND ASSOCIATES OBGYN LLC Occupation PHYSICIAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 5800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2021

Transaction ID : **A9F4EA9390B094D62B29**

Amount of Each Receipt this Period  
 5800.00

Memo Item  
 REATTRIBUTION REQUESTED

**B.** Full Name (Last, First, Middle Initial)  
**AULD, RONALD, C., MR.,**

Mailing Address 5210 PERCY RD

City PERCY State IL Zip Code 62272-1577

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **AD389E301519046B48B7**

Amount of Each Receipt this Period  
 250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BARBRE, MARTIN, R., MR.,**

Mailing Address 501 W MAIN ST

City CARMI State IL Zip Code 62821-1429

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

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

Transaction ID : **A484E803281D24ABF8BF**

Amount of Each Receipt this Period  
 500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 6550.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 108  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**BENNETT, DONALD, W., MR.,**

Mailing Address 429 S MAIN ST  
RM 331

City O FALLON State IL Zip Code 62269-3082

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : ACC37AE5538BA4AAB9ED

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BIGHAM, DONNA, K., MS.,**

Mailing Address 14327 MCRAVEN LN

City MOUNT VERNON State IL Zip Code 62864-6732

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2021

Transaction ID : AC98FF6D9C5CC4CA5B52

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BRIMM, JACK, D, MR.,**

Mailing Address 113 KOHLER AVE

City ANNA State IL Zip Code 62906-1635

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
725.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : A2C5EE54D317948BA9AC

Amount of Each Receipt this Period  
100.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1100.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**BURKHARDT, CRAIG, , MR.,**

Mailing Address 4000 CATHEDRAL AVE NW

City WASHINGTON State DC Zip Code 20016-5249

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

Name of Employer BARNES & THORNBURG Occupation ATTORNEY

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

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

Transaction ID : **AE97F0B42BA50403982D**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CAIN, COLLIN, , MR.,**

Mailing Address 8355 STATE ROUTE 146 W

City JONESBORO State IL Zip Code 62952-2611

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2021

Transaction ID : **AA60764377D144E818F1**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CARTER, ALISON, A, MRS.,**

Mailing Address 5760 TRICO RD

City CAMPBELL HILL State IL Zip Code 62916-3104

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **A0F75FB61E53C414BA8F**

Amount of Each Receipt this Period  
2900.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3650.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 108  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**CARTER, STEVE, , ,**

Mailing Address 500 CUTLER TRICO RD

City PERCY State IL Zip Code 62272-2716

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

Name of Employer KNIGHT HAWK COAL, LLC Occupation MANAGER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2900.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : **A64ECA0C65E5A4D5B8E9**

Amount of Each Receipt this Period  
2900.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CAVANESS, JONATHAN, S., ,**

Mailing Address PO BOX 668

City MARION State IL Zip Code 62959-0668

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

Name of Employer JACKSON GRAY Occupation INSURANCE

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2021

Transaction ID : **A5C8EACAEA8F5418EB37**

Amount of Each Receipt this Period  
250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CHAMBERLAIN, SARAH, M., MS.,**

Mailing Address 430 FERDINAND DAY DR

City ALEXANDRIA State VA Zip Code 22304-8701

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : **AD7312E55DEA94A659D5**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

4150.00



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**COPHER, MIKE, , ,**

Mailing Address 4530 CHASE OAK CT

City ZIONSVILLE State IN Zip Code 46077-9652

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

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

Transaction ID : **A9078DFA4523D41F2B93**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**COREY, RANDY, , MR.,**

Mailing Address 73 CEDAR CREEK RD

City MAKANDA State IL Zip Code 62958-2108

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **A01F4F4E3639748918AC**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CRALLEY, LAWRENCE, W, MR., JR.**

Mailing Address 1573 E GRANGE HALL RD

City MURPHYSBORO State IL Zip Code 62966-4355

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **AEBB72F72C2C84721AA6**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Memo Item

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

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

\_\_\_\_\_ 1200.00

\_\_\_\_\_

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 10 OF 108	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**CRANE, CHRISTOPHER, , ,**

Mailing Address **401 NORTH WABASH AVENUE**  
**39K**

City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60611</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>EXELON</b>	Occupation <b>CEO</b>
-----------------------------------	--------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
12 / 29 / 2021

**Transaction ID : A5FC257D24C36423D983**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CROSS, BRAD, K., ,**

Mailing Address **907 E BROADWAY ST**

City <b>MC LEANSBORO</b>	State <b>IL</b>	Zip Code <b>62859-4935</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>STC, INC.</b>	Occupation <b>BUSINESS MANAGER</b>
--------------------------------------	---------------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID : A53E2C0D8B9E14D6BBB9**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CROWN, LESTER, , MR.,**

Mailing Address **222 N LA SALLE ST**  
**STE 2000**

City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60601-1109</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>HENRY CROWN &amp; CO.</b>	Occupation <b>CHAIRMAN</b>
--	-------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 15 / 2021

**Transaction ID : A2793DE5E79E548D1B26**

Amount of Each Receipt this Period

Memo Item

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

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**CUNDIFF, CONNIE, S, MRS.,**  
 Mailing Address 1247 RUTHERFORD RIDGE  
 City O FALLON State IL Zip Code 62269-7027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2021  
**Transaction ID : A60754C0BB4EE4971975**  
 Amount of Each Receipt this Period  
 2800.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CUNDIFF, GREGORY, B, MR.,**  
 Mailing Address 1247 RUTHERFORD RDG  
 City O FALLON State IL Zip Code 62269-7027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer IRONHORSE RESOURCES Occupation EXECUTIVE  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2021  
**Transaction ID : A42DF33B48D71430A886**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DALLAS, BRUCE, B., ,**  
 Mailing Address 2132 RAINS ST  
 City MURPHYSBORO State IL Zip Code 62966-3202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 20 / 2021  
**Transaction ID : AFA5055BB12A9420B9AC**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 EARMARKED (NON-DIRECTED) THROUGH WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3250.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 12 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2021

**Transaction ID : A53368A10013D442297D**

Amount of Each Receipt this Period  
50.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**B.** Full Name (Last, First, Middle Initial)  
**DALLAS, BRUCE, B., ,**

Mailing Address 2132 RAINS ST

City MURPHYSBORO State IL Zip Code 62966-3202

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2021

**Transaction ID : AE0EC3A757F7D47839E9**

Amount of Each Receipt this Period  
10.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2021

**Transaction ID : ABF3DD440A8394BF5A5C**

Amount of Each Receipt this Period  
10.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10.00

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

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

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

FOR LINE NUMBER: PAGE 13 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**DAVIS, MARTIN, L., MR.,**

Mailing Address 401 W SPRESSER ST

City TAYLORVILLE State IL Zip Code 62568-1853

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

Name of Employer M. DAVIS MANAGEMENT CO. INC. Occupation PRESIDENT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2021

Transaction ID : A0293D7C75E71469980A

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DIERBERG, ROBERT, J., ,**

Mailing Address 1982 KEHRS MILL RD

City CHESTERFIELD State MO Zip Code 63005-6537

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

Name of Employer DIERBERGS MARKETS Occupation CHAIRMAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : AD06EE42009804530812

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DRAVES, DELBERT, L, MR.,**

Mailing Address 11496 COUNTY FARM RD

City CHESTER State IL Zip Code 62233-2400

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : AB312D638DBF3447CBF3

Amount of Each Receipt this Period  
100.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3050.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**ETHERTON, MICHAEL, , ,**

Mailing Address 242 SHOAL CREEK ROAD

City MURPHYSBORO State IL Zip Code 62966

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 31 2021

Transaction ID : **A238833AA3DA149FFA71**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FORTNER, MICHAEL, , MR.,**

Mailing Address 212 FULTON ST

City WEST CHICAGO State IL Zip Code 60185-2823

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

Name of Employer RCH CONSULTING Occupation CONSULTANT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 28 2021

Transaction ID : **A63AEAB232F78490B81D**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GIDWITZ, RONALD, , ,**

Mailing Address 285 S BEACH RD

City HOBE SOUND State FL Zip Code 33455-2604

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

Name of Employer CONTINENTAL MATERIALS Occupation EXECUTIVE

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 21 2021

Transaction ID : **A0186249AFA4C45C89BB**

Amount of Each Receipt this Period  
2900.00

Memo Item

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

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

4400.00

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

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

FOR LINE NUMBER: PAGE 15 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**GILL, RON, , COL.,**

Mailing Address 312 GLENROCK LANE

City FREEBURG    State IL    Zip Code 62243-2643

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 281.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2021

Transaction ID : **A4397A79BE3204C27AAE**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 75.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GILL, RON, , COL.,**

Mailing Address 312 GLENROCK LANE

City FREEBURG    State IL    Zip Code 62243-2643

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 381.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **AF6539DB7E8C94668988**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GOODWIN, DANIEL, L., MR.,**

Mailing Address 85 BAYBROOK LN

City OAK BROOK    State IL    Zip Code 60523-1636

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

Name of Employer INLAND    Occupation CEO

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **ABE9613D4CA134F83AE0**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item

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

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

\_\_\_\_\_ 675.00

\_\_\_\_\_

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

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

FOR LINE NUMBER: PAGE 16 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**GORTON, BRYON, J., DR.,**

Mailing Address 1205 TANGLEWOOD TRCE

City O FALLON State IL Zip Code 62269-3112

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

Name of Employer HSHS MEDICAL GROUP Occupation PHYSICIAN

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

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

Transaction ID : **ACB21E4A5139E4BE681E**

Amount of Each Receipt this Period  
200.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HALTERMAN, CHARLES, T, MR.,**

Mailing Address 102 APPLE LN

City ANNA State IL Zip Code 62906-1114

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 28 2021

Transaction ID : **A4DC520268D664094B4A**

Amount of Each Receipt this Period  
200.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HANDY, EVAN, , ,**

Mailing Address 2545 NW 28TH ST

City OKLAHOMA CITY State OK Zip Code 73107

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 26 2021

Transaction ID : **ADB281694ED6845ECBB9**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00

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



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

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

FOR LINE NUMBER: PAGE 17 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**HARLAND, JUDITH, A., MRS.,**

Mailing Address 1382 NICKLAUS LN

City MARION State IL Zip Code 62959-8598

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **AA87049BFD7314260A9C**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HICKEM, FRED, P., MR.,**

Mailing Address 8616 E JACKSON STREET RD

City DU QUOIN State IL Zip Code 62832-3800

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **A35D02387A5EA4D948B9**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HOLLAND, BRUCE, B., MR.,**

Mailing Address 4495 N ILLINOIS ST

City SWANSEA State IL Zip Code 62226-1005

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

Name of Employer HOLLAND CONSTRUCTION SERVICE Occupation CEO

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 18 / 2021

Transaction ID : **ACD27158F88E04BA2A4F**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

1150.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**HOYLE, NELLIE, , MRS.,**

Mailing Address 196 SPRING DR

City MURPHYSBORO State IL Zip Code 62966-4034

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : **ADF8F843C74941D3A5E**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HUFFMAN, GEORGE, T., MR., JR.**

Mailing Address 855 GRAND TOWER RD

City GRAND TOWER State IL Zip Code 62942-1100

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

Name of Employer GEORGE HUFFMAN & SONS TRUCKING Occupation OWNER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 28 / 2021

Transaction ID : **A363F7186836540C882C**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HUNT, WOODY, L., MR.,**

Mailing Address PO BOX 12667

City EL PASO State TX Zip Code 79913-0667

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

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

Transaction ID : **A127555DD82604E21ABC**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 19 OF 108	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**HURSEY, GARY, , ,**

Mailing Address 1221 TRAILWOOD CT

City O FALLON	State IL	Zip Code 62269
------------------	-------------	-------------------

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

Name of Employer TELECOM DIRECT, LLC	Occupation TELECOM
---	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2021

**Transaction ID : A7957E80FCBA94CC08ED**

Amount of Each Receipt this Period  
100.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 08 / 2021

**Transaction ID : A087727707B7945F2A3C**

Amount of Each Receipt this Period  
100.00

Memo Item  
INTERMEDIARY  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**HURSEY, GARY, , ,**

Mailing Address 1221 TRAILWOOD CT

City O FALLON	State IL	Zip Code 62269
------------------	-------------	-------------------

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

Name of Employer TELECOM DIRECT, LLC	Occupation TELECOM
---	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 30 / 2021

**Transaction ID : AAD83C82F6E0A4D65BB3**

Amount of Each Receipt this Period  
100.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 06 / 2021

**Transaction ID : A1A03087C05B7403D8A3**

Amount of Each Receipt this Period  
100.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**B.** Full Name (Last, First, Middle Initial)  
**HURSEY, GARY, , ,**

Mailing Address 1221 TRAILWOOD CT

City O FALLON State IL Zip Code 62269

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

Name of Employer Occupation  
TELECOM DIRECT, LLC TELECOM

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 30 / 2021

**Transaction ID : AD782FB1775084DCE991**

Amount of Each Receipt this Period  
100.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

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

**Transaction ID : A75EBEDA5A5C44391AB2**

Amount of Each Receipt this Period  
100.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

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

100.00

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

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

FOR LINE NUMBER: PAGE 21 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**JENKINS, RANDALL, K, MR.,**  
 Mailing Address 15782 N COUNTRY FARM LANE  
 City MOUNT VERNON State IL Zip Code 62864-9848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ARDL Occupation EXECUTIVE  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2021  
**Transaction ID : A4B92D8CB74924A72B67**  
 Amount of Each Receipt this Period  
 1900.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**JENKINS, VALERIE, A, MRS.,**  
 Mailing Address 15782 N COUNTRY FARM LANE  
 City MOUNT VERNON State IL Zip Code 62864-9848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ARDL, INC. Occupation EXECUTIVE  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2021  
**Transaction ID : A62BC41CFB397454D9F6**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JENKINS, VALERIE, A, MRS.,**  
 Mailing Address 15782 N COUNTRY FARM LANE  
 City MOUNT VERNON State IL Zip Code 62864-9848  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ARDL, INC. Occupation EXECUTIVE  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 3900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2021  
**Transaction ID : AAA620E24834A4B8ABFA**  
 Amount of Each Receipt this Period  
 1900.00  
 Memo Item

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

4800.00

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

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

FOR LINE NUMBER: PAGE 22 OF 108  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**KELLEY, PATRICK, J, MR.,**

Mailing Address 2621 S ILLINOIS AVE

City CARBONDALE	State IL	Zip Code 62903-5915
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 28 / 2021

Transaction ID : **A7A842E9047E0414681E**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KETTLER, EDWARD, A., MR.,**

Mailing Address 212 W SOUTH ST

City MASCOUTAH	State IL	Zip Code 62258-1915
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2021

Transaction ID : **AB0CBD5B5C76A43CEBC5**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KIRCHNER, KAREN, , ,**

Mailing Address 1682 W WILLOWBROOK DR

City NASHVILLE	State IL	Zip Code 62263-1392
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FEC ID number of contributing federal political committee. **C**

Name of Employer NOTS LOGISTICS	Occupation EXECUTIVE ASSISTANT
------------------------------------	-----------------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 12 / 2021

Transaction ID : **A6EECDAB8E73949E09F5**

Amount of Each Receipt this Period  
250.00

Memo Item

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 23 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**KOENTZ, WILLIAM, G., MR.,**  
Mailing Address 9 NO. FIRST ST.  
City NEW BADEN State IL Zip Code 62265  
FEC ID number of contributing federal political committee. C  
Name of Employer SELF EMPLOYED Occupation DENTIST  
Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 28 / 2021  
Transaction ID : A7B5A15D1EB9644C48E3  
Amount of Each Receipt this Period  
100.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KRAFT, LARRY, W., MR.,**  
Mailing Address 4957 QUIRIN RD  
City SMITHTON State IL Zip Code 62285-2815  
FEC ID number of contributing federal political committee. C  
Name of Employer CUSTOM MARBLE Occupation BUSINESS OWNER  
Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021  
Transaction ID : A2E5989D69CC34AA2A7B  
Amount of Each Receipt this Period  
150.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LOJACONO, GREGORY, , MR.,**  
Mailing Address 2407 PRO TOUR DR  
City BELLEVILLE State IL Zip Code 62220-4853  
FEC ID number of contributing federal political committee. C  
Name of Employer NONE Occupation RETIRED  
Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 30 / 2021  
Transaction ID : A7EB7B0DC5B204E52A38  
Amount of Each Receipt this Period  
50.00  
 Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

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

FOR LINE NUMBER: PAGE 24 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 06 / 2021

**Transaction ID : A5293A8EEF1C34926B32**

Amount of Each Receipt this Period  
50.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**B.** Full Name (Last, First, Middle Initial)  
**LYLE, DENNIS, , ,**

Mailing Address PO BOX 139

City CARTERVILLE State IL Zip Code 62918-0139

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

Name of Employer Occupation  
ILLINOIS BROADCASTERS ASSOCIATION EXECUTIVE

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 30 / 2021

**Transaction ID : A54C77CE5A46246D4A4C**

Amount of Each Receipt this Period  
500.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH  
ARISTOTLE

**C.** Full Name (Last, First, Middle Initial)  
**ARISTOTLE**

Mailing Address 205 PENNSYLVANIA AVENUE SE

City WASHINGTON State DC Zip Code 20003-1164

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

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 22 / 2021

**Transaction ID : A85A07DAE633F4C82BFC**

Amount of Each Receipt this Period  
500.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

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



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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 25 OF 108

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MARKO, PAMELA, J., MRS.,**  
 Mailing Address 4805 WHITFORD DR

City GODFREY    State IL    Zip Code 62035-1208

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

Name of Employer INFORMATION REQUESTED    Occupation INFORMATION REQUESTED

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2021

Transaction ID : **A7F97B2F5A69F477DAAE**

Amount of Each Receipt this Period  
 2250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MASCHHOFF, DAVID, W., MR.,**  
 Mailing Address 18339 POST OAK RD

City CARLYLE    State IL    Zip Code 62231-3017

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

Name of Employer THE MASCHHOFFS    Occupation FARMER

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2021

Transaction ID : **A8E8C39F053594B4A984**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MASCHHOFF, KAREN, G, MRS.,**  
 Mailing Address 18339 POST OAK RD

City CARLYLE    State IL    Zip Code 62231-3017

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2021

Transaction ID : **A93B4CE7224A348F0A02**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

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

7250.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MCDONALD, JOHN, , ,**

Mailing Address 2623 PIPERS CT

City BELLEVILLE State IL Zip Code 62221-3481

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 28 2021

Transaction ID : **A6D890154770C44AF910**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MCKEE, BARBARA, BAKER, MRS.,**

Mailing Address 5 SIGNAL PT

City BELLEVILLE State IL Zip Code 62223-1233

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

Name of Employer R. CRAIG MCKEE MD Occupation OFFICE MANAGER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 21 2021

Transaction ID : **A41EF40E015094BE9A3A**

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MIHALICH, PAUL, , MR.,**

Mailing Address 1 COBBLESTONE CT

City GRANITE CITY State IL Zip Code 62040-5183

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 12 2021

Transaction ID : **A42A6E82084174AA1BDE**

Amount of Each Receipt this Period  
250.00

Memo Item

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

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

400.00

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

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

FOR LINE NUMBER: PAGE 27 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MIHALICH, PAUL, , MR.,**  
Mailing Address 1 COBBLESTONE CT

City GRANITE CITY    State IL    Zip Code 62040-5183

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2021

Transaction ID : **A860063D3372544FCB44**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MIKKELSON, JANET, B., ,**  
Mailing Address 1385 WEIL RD

City LEBANON    State IL    Zip Code 62254-1809

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2021

Transaction ID : **AB77A7A3B598C4E28ABB**

Amount of Each Receipt this Period  
 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MILNE, JOHN, D., MR.,**  
Mailing Address 409 G ST SE

City WASHINGTON    State DC    Zip Code 20003-4257

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

Name of Employer THE FIRST GROUP    Occupation PRINCIPAL

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **AA66F22A8A91E435ABFC**

Amount of Each Receipt this Period  
 500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1100.00

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



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**PLUMLEE, CATHY, A., MRS.,**

Mailing Address 3597 CLOVER LAKE DR

City PINCKNEYVILLE State IL Zip Code 62274-2907

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 14 2021

Transaction ID : **A8732E635CBD54136A1E**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**POWLESS, DAVID, G, MR.,**

Mailing Address 1504 BRYAN DR

City MARION State IL Zip Code 62959-1460

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

Name of Employer KEMPER CPA GROUP LLP Occupation CPA

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
215.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 28 2021

Transaction ID : **A776CAC0DC34940F3A19**

Amount of Each Receipt this Period  
30.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RADER, JANE HAYES, , MS.,**

Mailing Address 975 BELL HILL RD

City COBDEN State IL Zip Code 62920-3415

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

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

Transaction ID : **A282E531EC2844149852**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 630.00

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

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

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

FOR LINE NUMBER: PAGE 30 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**RAUSCHENBERGER, STEVEN, J., MR.,**

Mailing Address 422 N WORTH AVE

City ELGIN	State IL	Zip Code 60123-3451
---------------	-------------	------------------------

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

Name of Employer RAUSCHENBERGER PARTNERS	Occupation CONSULTANT
---	--------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
700.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		30		2021

**Transaction ID : A8B81947A328D40BF9E0**

Amount of Each Receipt this Period  
200.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		06		2021

**Transaction ID : AF85D8FB30BF744418B6**

Amount of Each Receipt this Period  
200.00

Memo Item  
INTERMEDIARY  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**RICHTER, GRANT, , MR.,**

Mailing Address 726 E WOOD

City COLUMBIA	State IL	Zip Code 62236-2078
------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
775.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		04		2021

**Transaction ID : A891481AE1CD6485C8B9**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 31 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**RICHTER, GRANT, , MR.,**  
Mailing Address 726 E WOOD

City COLUMBIA State IL Zip Code 62236-2078

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 20 2021

Transaction ID : **AF914B52533A54EF58BF**

Amount of Each Receipt this Period  
25.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**  
Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 25 2021

Transaction ID : **A203E7CDADE8C4E07BE6**

Amount of Each Receipt this Period  
25.00

Memo Item  
INTERMEDIARY  
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**RICHTER, GRANT, , MR.,**  
Mailing Address 726 E WOOD

City COLUMBIA State IL Zip Code 62236-2078

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
825.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 22 2021

Transaction ID : **A544410B33E694CAB99D**

Amount of Each Receipt this Period  
25.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

50.00

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

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

FOR LINE NUMBER: PAGE 32 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 29 2021

Transaction ID : **AF33A7540EE624D25BD6**

Amount of Each Receipt this Period  
25.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**B.** Full Name (Last, First, Middle Initial)  
**RISLEY, NORMAN, D., MR.,**

Mailing Address 6948 STATE HIGHWAY 154

City SESSER State IL Zip Code 62884-2102

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 14 2021

Transaction ID : **ACC03F7D2E25D4C27804**

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ROBERTS, MARY, LOU, MRS.,**

Mailing Address 760 W HARRISON RD

City MURPHYSBORO State IL Zip Code 62966-4528

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

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

Transaction ID : **A3CAA38E5C80D4309BA2**

Amount of Each Receipt this Period  
200.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00

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



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

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

FOR LINE NUMBER: PAGE 33 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**SANDRAVELIS, ANGELOS, , ,**  
 Mailing Address 4500 S LAKE RD  
 City PINCKNEYVILLE State IL Zip Code 62274-3040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 15 2021  
**Transaction ID : AB9677891D2204A8F819**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SCHRIMPF, MATTHEW, W., MR.,**  
 Mailing Address 3669 TORCH CLUB RD  
 City ALTON State IL Zip Code 62002-7947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HWRT MANAGEMENT Occupation EXECUTIVE  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 06 2021  
**Transaction ID : A0BD59B31241C4E4F8E2**  
 Amount of Each Receipt this Period  
 2900.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SHIM, SAM, S., MR.,**  
 Mailing Address 1157 STONEWOLF TRAIL  
 City FAIRVIEW HEIGHTS State IL Zip Code 62208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JACKIE SHIM DDS Occupation DENTIST  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 13 2021  
**Transaction ID : A2FA2687A1AB94057824**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

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

4400.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 34 OF 108	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**STINE, ARTHUR, M., ,**

Mailing Address PO BOX 367

City OKAWVILLE	State IL	Zip Code 62271-0367
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

**Transaction ID : AF8D1746135104188A1B**

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**STINE, ARTHUR, M., ,**

Mailing Address PO BOX 367

City OKAWVILLE	State IL	Zip Code 62271-0367
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2021

**Transaction ID : AF5690C59A8C14BDEB16**

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**STINE, ARTHUR, M., ,**

Mailing Address PO BOX 367

City OKAWVILLE	State IL	Zip Code 62271-0367
-------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2021

**Transaction ID : A90DF3F848151461F994**

Amount of Each Receipt this Period

Memo Item

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

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

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

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

FOR LINE NUMBER: PAGE 35 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**STORM, GARY, D., MR.,**  
Mailing Address 2155 FOREMAN CT

City GRANITE CITY    State IL    Zip Code 62040-2546

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

Name of Employer NONE    Occupation RETIRED

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **AB9C03DD04DFB4671AFE**

Amount of Each Receipt this Period  
200.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**STOTLAR, WILLIAM, B, MR.,**  
Mailing Address 3209 DALMATION RD

City PINCKNEYVILLE    State IL    Zip Code 62274-3224

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

Name of Employer AMERICAN AIRLINES    Occupation PILOT

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2021

Transaction ID : **A0CA255439BE44873BB9**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**STOTLAR, WILLIAM, B, MR.,**  
Mailing Address 3209 DALMATION RD

City PINCKNEYVILLE    State IL    Zip Code 62274-3224

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

Name of Employer AMERICAN AIRLINES    Occupation PILOT

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2021

Transaction ID : **ACC11D4D6F1A24F73843**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 36 OF 108  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**STRACK, LOUIS, E., ,**

Mailing Address 1677 STAVE MILL RD

City MURPHYSBORO State IL Zip Code 62966-4854

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : **A4ACCA6B3FA0C4FE481E**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**STUMPF, GLENN, F., ,**

Mailing Address 9474 D RD

City COLUMBIA State IL Zip Code 62236-4438

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : **A0D4554F7042F4733A9F**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TAFLINGER, JAMES, F., MR.,**

Mailing Address 20380 MILLER CITY RD

City MILLER CITY State IL Zip Code 62962-2008

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2021

Transaction ID : **A38BC4831124C430DB01**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00

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

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

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

FOR LINE NUMBER: PAGE 37 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**TALBERT, RICHARD, , MR.,**  
Mailing Address 713 COUNTY RD 1000 N

City: WAYNE CITY State: IL Zip Code: 62895-0465

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED Occupation: FARMER

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 600.00

Date of Receipt: 12 / 21 / 2021  
Transaction ID : ABDEADD6EDBF64715B25

Amount of Each Receipt this Period: 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TEMPLE, VICKI, , ,**  
Mailing Address 2508 WESTINGHOUSE

City: BELLEVILLE State: IL Zip Code: 62221-3538

FEC ID number of contributing federal political committee: C

Name of Employer: REMAX PREFERRED Occupation: REAL ESTATE

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 250.00

Date of Receipt: 12 / 21 / 2021  
Transaction ID : ADED45340E566445AA69

Amount of Each Receipt this Period: 250.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TRACY, JIL, W., MRS.,**  
Mailing Address 1636 FIELDSTONE DR

City: QUINCY State: IL Zip Code: 62305-6699

FEC ID number of contributing federal political committee: C

Name of Employer: STATE OF ILLINOIS Occupation: ATTORNEY

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 12 / 21 / 2021  
Transaction ID : A2C92DE4B073E4B1195C

Amount of Each Receipt this Period: 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1350.00

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

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

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

FOR LINE NUMBER: PAGE 38 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**TSUNG, FRANCIS, H., ,**  
 Mailing Address 487 EGRET LAKE RD  
 City CARBONDALE State IL Zip Code 62903-7606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SI OBGYN ASSOCIATES Occupation PHYSICIAN  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 12 2021  
**Transaction ID : AC802761D1FA54A5E89C**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**VOGES, JOAN, E., MRS.,**  
 Mailing Address 11113 OBST RD  
 City RED BUD State IL Zip Code 62278-4225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 21 2021  
**Transaction ID : A02E33240E09C493A821**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WAGNER, MARSHA, L, MRS.,**  
 Mailing Address 7 IRMA LN  
 City FAIRVIEW HEIGHTS State IL Zip Code 62208-1904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NONE Occupation RETIRED  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 21 2021  
**Transaction ID : A253F5E28AC9F4EE1AF8**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

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

1200.00

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

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

FOR LINE NUMBER: PAGE 39 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**WALL, RICHARD, KEITH, MR.,**  
Mailing Address PO BOX 973

City: MARION    State: IL    Zip Code: 62959-7473

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED    Occupation: TITLE ABTRACTOR

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 12 / 21 / 2021  
Transaction ID : A02E06C87CDCB44D681F

Amount of Each Receipt this Period: 100.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WATTLES, ALAN, W, MR.,**  
Mailing Address PO BOX 128

City: WATERLOO    State: IL    Zip Code: 62298-0128

FEC ID number of contributing federal political committee: C

Name of Employer: MONROE COUNTY ELECTRIC COOP    Occupation: PRESIDENT/CEO

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 12 / 28 / 2021  
Transaction ID : AEF775CC6401A4C449E5

Amount of Each Receipt this Period: 500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WIELAND, JANE, F, MRS.,**  
Mailing Address 1800 RIVIERA LN

City: O FALLON    State: IL    Zip Code: 62269-6696

FEC ID number of contributing federal political committee: C

Name of Employer: NONE    Occupation: RETIRED

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 10 / 22 / 2021  
Transaction ID : A5F12F158258149729FF

Amount of Each Receipt this Period: 50.00

Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 650.00

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

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

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

FOR LINE NUMBER: (check only one)		PAGE 40 OF 108	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15473.01

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2021

**Transaction ID : A14340790BF3A405ABB5**

Amount of Each Receipt this Period  
50.00

Memo Item  
INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.

**B.** Full Name (Last, First, Middle Initial)  
**WIELAND, JANE, F, MRS.,**

Mailing Address 1800 RIVIERA LN

City O FALLON State IL Zip Code 62269-6696

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : A1517F1B1734A46E8AE6**

Amount of Each Receipt this Period  
50.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAMS, KEVIN, B., MR.,**

Mailing Address 211 CHESTNUT ST

City DE SOTO State IL Zip Code 62924-1133

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

Name of Employer Occupation  
SELF EMPLOYED REAL ESTATE

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 28 / 2021

**Transaction ID : AF03A24BD0020413D935**

Amount of Each Receipt this Period  
100.00

Memo Item

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



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

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

FOR LINE NUMBER: PAGE 41 OF 108  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAMS, KEVIN, B., MR.,**  
Mailing Address 211 CHESTNUT ST  
City DE SOTO State IL Zip Code 62924-1133  
FEC ID number of contributing federal political committee. C  
Name of Employer SELF EMPLOYED Occupation REAL ESTATE  
Receipt For: 2022  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021  
Transaction ID : AB96FD48D512F4B0FAEC  
Amount of Each Receipt this Period  
100.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**WOOD, DANA, S., ,**  
Mailing Address 2208 WINDSOR RD  
City ALEXANDRIA State VA Zip Code 22307-1018  
FEC ID number of contributing federal political committee. C  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For: 2022  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021  
Transaction ID : A5FA52E990E57400E9F7  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WOODROW, ELIZABETH, , ,**  
Mailing Address 1849 COUNTY ROAD 210 N  
City BARNHILL State IL Zip Code 62809-1043  
FEC ID number of contributing federal political committee. C  
Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED  
Receipt For: 2022  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 14 / 2021  
Transaction ID : A62687675E730462684B  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1350.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 42 OF 108	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**WOODROW, SHELLEY, M., ,**

Mailing Address 17653 COUNTY ROAD 1500 E

City SPRINGERTON	State IL	Zip Code 62887-2128
---------------------	-------------	------------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 06 / 2021

**Transaction ID : A8B636CE931264AC8B52**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	67615.00

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

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

FOR LINE NUMBER: PAGE 43 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**ABBOTT LABORATORIES EMPLOYEE PAC**  
 Mailing Address 100 ABBOTT PARK ROAD  
 City ABBOTT PARK State IL Zip Code 60064-3502  
 FEC ID number of contributing federal political committee. **C** C00040279  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021  
**Transaction ID : ADB5CD30E22EF4CC49FD**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ABBIE POLITICAL ACTION COMMITTEE**  
 Mailing Address 1 N WAUKEGAN RD  
 City NORTH CHICAGO State IL Zip Code 60064-1802  
 FEC ID number of contributing federal political committee. **C** C00536573  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2021  
**Transaction ID : A5B4FCEDD55374DDCA57**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**ACTION COMMITTEE FOR RURAL ELECTRIFICATION**  
 Mailing Address 4301 WILSON BOULEVARD  
 City ARLINGTON State VA Zip Code 22203-1867  
 FEC ID number of contributing federal political committee. **C** C00002972  
 Name of Employer Occupation  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021  
**Transaction ID : AE7C5658DFABC46389D1**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**ACTION COMMITTEE FOR RURAL ELECTRIFICATION**

Mailing Address 4301 WILSON BOULEVARD

City ARLINGTON	State VA	Zip Code 22203-1867
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : AC7504A859BD44426B41**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ADM PAC**

Mailing Address PO BOX 1470

City DECATUR	State IL	Zip Code 62525-1820
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00093963

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : A5B17BDF20F5540F2A94**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOC. INTERNATIONAL PAC**

Mailing Address 1625 MASSACHUSETTS AVE NW

City WASHINGTON	State DC	Zip Code 20036-2212
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : AE0BD98C8B335451C888**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 45 OF 108	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**AMEREN FED PAC**

Mailing Address 1331 PENNSYLVANIA AVE NW  
STE 550

City WASHINGTON State DC Zip Code 20004-1776

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

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

Transaction ID : **A3B3A5F4D2FBD4282BC6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)**

Mailing Address 25 MASSACHUSETTS AVE NW  
STE 550

City WASHINGTON State DC Zip Code 20001-1408

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

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

Transaction ID : **A2E86AFEB03C344AB975**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC**

Mailing Address 1120 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036-3902

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

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

Transaction ID : **A9D9B302E1A514578803**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN IRON AND STEEL INSTITUTE PAC (STEEL PAC)**

Mailing Address 25 MASSACHUSETTS AVE NW  
STE 800

City WASHINGTON	State DC	Zip Code 20001-7406
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00295097

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 23 / 2021

**Transaction ID : AABA758226E614697BC4**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN MARITIME OFFICERS PAC**

Mailing Address PO BOX 66

City DANIA	State FL	Zip Code 33004-0066
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 23 / 2021

**Transaction ID : A1244AB49A6A849C4AE3**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN MARITIME OFFICERS PAC**

Mailing Address PO BOX 66

City DANIA	State FL	Zip Code 33004-0066
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027532

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : AA5DED2826F914C2EAEA**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROCPAC)

Mailing Address 1201 15TH ST NW  
STE 400

City WASHINGTON	State DC	Zip Code 20005-2899
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00358663

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  

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

**Transaction ID : A89BD30C7BBF841E696F**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN SUGAR CANE LEAGUE PAC

Mailing Address 938 PO BOX

City THIBODAUX	State LA	Zip Code 70302-0938
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00081414

Name of Employer	Occupation
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Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
11 / 23 / 2021

**Transaction ID : AF811A0E2D14B4C7C80C**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
BOLD ACTIVE CONSERVATIVES OF NEBRASKA PAC-BACON PAC

Mailing Address 228 S WASHINGTON ST  
STE 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00647420

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

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

**Transaction ID : A95C61ECB89964E5BA40**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**BOSTON SCIENTIFIC CORPORATION PAC (BSC PAC)**

Mailing Address 300 BOSTON SCIENTIFIC WAY

City MARLBOROUGH	State MA	Zip Code 01752-1291
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00357863

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

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

**Transaction ID : A49E51B35F39441EDB6C**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BUNGE NORTH AMERICA PAC**

Mailing Address 25 MASSACHUSETTS AVE NW  
STE 340

City WASHINGTON	State DC	Zip Code 20001-7404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00401687

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2021

**Transaction ID : AD4AC84044CA64947B15**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CAREER EDUCATION COLLEGES AND UNIVERSITIES PAC**

Mailing Address 1530 WILSON BLVD  
STE 1050

City ARLINGTON	State VA	Zip Code 22209-2418
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00213066

Name of Employer	Occupation
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Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

**Transaction ID : AA0F7A2CADE934C8FAC1**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____



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

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

FOR LINE NUMBER: (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**CHICAGO BOARD OPTIONS EXCHANGE PAC (CBOE PAC)**

Mailing Address 400 S LASALLE ST

City CHICAGO State IL Zip Code 60605-1023

FEC ID number of contributing federal political committee. **C** C00100693

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

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

Transaction ID : AF1D5E862421A40E6B7D

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CIGNA CORPORATION PAC**

Mailing Address 701 PENNSYLVANIA AVE NW  
 STE 720

City WASHINGTON State DC Zip Code 20004-2626

FEC ID number of contributing federal political committee. **C** C00085316

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 23 2021

Transaction ID : A0C3430F78CFA44DEAD9

Amount of Each Receipt this Period  
 2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CLEVELAND-CLIFFS INC. PAC (CLIFFSPAC)**

Mailing Address 200 PUBLIC SQ  
 STE 3300

City CLEVELAND, State OH Zip Code 44114-2315

FEC ID number of contributing federal political committee. **C** C00039016

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 23 2021

Transaction ID : A2BEE298720464472840

Amount of Each Receipt this Period  
 1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**CME GROUP, INC. PAC**

Mailing Address 20 S WACKER DR

City CHICAGO	State IL	Zip Code 60606-7431
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2021

**Transaction ID : AB308B75A92E04A09B42**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CONCRETE REINFORCING STEEL INSTITUTE PAC (REBAR PAC)**

Mailing Address 933 N PLUM GROVE RD

City SCHAUMBURG	State IL	Zip Code 60173-4767
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00565614

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2021

**Transaction ID : A48A13F65B6924F70905**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**COUNCIL OF INSURANCE AGENTS AND BROKERS PAC**

Mailing Address 701 PENNSYLVANIA AVE NW  
STE 750

City WASHINGTON	State DC	Zip Code 20004-2661
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

**Transaction ID : A43CF0C4838614C50898**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**CULAC THE PAC**

Mailing Address 601 PENNSYLVANIA AVE NW

City WASHINGTON	State DC	Zip Code 20004-2601
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 23 / 2021

**Transaction ID : A6B5F8D05CB224C2EB36**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DAVITA INC. PAC (DAPAC)**

Mailing Address 32275 32ND AVE S

City FEDERAL WAY	State WA	Zip Code 98001-9616
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00340943

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

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

**Transaction ID : A09B0F11DD28444F6A55**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
DISTRICT NO. 1-PCD, MARINE ENGINEERS' BENEFICIAL ASSOC. - POLITICAL ACTION FUND (MEBA-PAF)

Mailing Address 444 N CAPITOL ST NW  
STE 800

City WASHINGTON	State DC	Zip Code 20001-1508
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00279380

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : A58AA37BBF4EA4C0099F**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 52 OF 108	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**DOCUMENT STORAGE SYSTEMS, INC. (DSS PAC)**

Mailing Address 12575 US HIGHWAY 1  
STE 200

City JUNO BEACH	State FL	Zip Code 33408-2478
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00683334

Name of Employer	Occupation
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Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : AC41617B8D4394A92A9D**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**EUREKA PAC**

Mailing Address PO BOX 30844

City BETHESDA	State MD	Zip Code 20824-0844
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00390161

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : A6F90D786B46347FDA28**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EXELON PAC**

Mailing Address PO BOX 805379

City CHICAGO	State IL	Zip Code 60680-4179
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00141218

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 23 / 2021

**Transaction ID : AC0F1C731029D4657BCC**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

7000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**EYE OF THE TIGER PAC**

Mailing Address PO BOX 2485

City SPRINGFIELD State VA Zip Code 22152-0485

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 21 2021

Transaction ID : AA97D9634F5044A55878

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FRESENIUS MEDICAL CARE NORTH AMERICA PAC**

Mailing Address 801 PENNSYLVANIA AVE NW  
STE 255

City WASHINGTON State DC Zip Code 20004-3637

FEC ID number of contributing federal political committee. **C** C00401299

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 21 2021

Transaction ID : A79462428D7D14FC9B0D

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS CORPORATION PAC (GDC PAC)**

Mailing Address 11011 SUNSET HILLS RD

City RESTON State VA Zip Code 20190-5311

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 21 2021

Transaction ID : A0658E3600FBF4BCDA9A

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**GENERAL MOTORS COMPANY PAC (GM PAC)**

Mailing Address 25 MASSACHUSETTS AVE NW  
STE 400

City WASHINGTON State DC Zip Code 20001-1427

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : **A0BB3F2F4501E432EACD**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**GROWTH ENERGY PAC**

Mailing Address 777 N CAPITOL ST NE  
STE 805

City WASHINGTON State DC Zip Code 20002-4294

FEC ID number of contributing federal political committee. **C** C00475665

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

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

Transaction ID : **A5CB05689DBB7415B931**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**HEALTH CARE SERVICE CORPORATION EMPLOYEES' PAC**

Mailing Address 300 E RANDOLPH ST

City CHICAGO State IL Zip Code 60601-5014

FEC ID number of contributing federal political committee. **C** C00199711

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 23 / 2021

Transaction ID : **ACE269F00E31B405185D**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**HEARTDOCPAC**

Mailing Address PO BOX 628

City EVANSVILLE State IN Zip Code 47704-0628

FEC ID number of contributing federal political committee. **C** C00523381

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

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

Transaction ID : **ACA5169B2ED3D4E96AEC**

Amount of Each Receipt this Period  
2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT COMMUNITY BANKERS PAC**

Mailing Address 1615 L ST NW STE 900

City WASHINGTON State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

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

Transaction ID : **A14FD6B5E10234F2A84E**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA PAC**

Mailing Address 412 1ST ST SE STE 300

City WASHINGTON State DC Zip Code 20003-1804

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

Transaction ID : **AD2F048AEC03D47D4AAB**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 56 OF 108	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**JIL TRACY FOR STATE SENATE**

Mailing Address 1628 FIELDSTONE DR

City QUINCY	State IL	Zip Code 62305-6699
----------------	-------------	------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 28 / 2021

**Transaction ID : AC67AEB9B922949458D8**

Amount of Each Receipt this Period  
1000.00

Memo Item  
VERIFICATION OF PERMISSIBLE FUNDS REQUESTED

**B.** Full Name (Last, First, Middle Initial)  
**JOHNSON & JOHNSON PAC**

Mailing Address 1350 I ST NW  
STE 1210

City WASHINGTON	State DC	Zip Code 20005-3305
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00010983

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : AC6843210997447DE92E**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**JOY PAC**

Mailing Address 824 S MILLEDGE AVE  
STE 101

City ATHENS	State GA	Zip Code 30605-1332
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00760629

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

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

**Transaction ID : A11BAA8D20061413C83E**

Amount of Each Receipt this Period  
2000.00

Memo Item

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

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

4000.00



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

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

FOR LINE NUMBER: PAGE 57 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN MCCARTHY FOR CONGRESS**

Mailing Address PO BOX 12667

City BAKERSFIELD State CA Zip Code 93389-2667

FEC ID number of contributing federal political committee. **C** C00420935

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2021

Transaction ID : **A7EAE0285B14E418F876**

Amount of Each Receipt this Period  
 2000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KEVIN MCCARTHY FOR CONGRESS**

Mailing Address PO BOX 12667

City BAKERSFIELD State CA Zip Code 93389-2667

FEC ID number of contributing federal political committee. **C** C00420935

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2021

Transaction ID : **AD703F48CF1B34867BDB**

Amount of Each Receipt this Period  
 2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**KOCH PAC**

Mailing Address 600 14TH ST NW  
STE 800

City WASHINGTON State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **A31A3BEE30C834D86A96**

Amount of Each Receipt this Period  
 5000.00

Memo Item

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

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

9000.00

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

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

FOR LINE NUMBER: PAGE 58 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**LEIDOS INC. PAC**

Mailing Address 301 LABORATORY RD

City OAK RIDGE State TN Zip Code 37830-6912

FEC ID number of contributing federal political committee. **C** C00546234

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **A0F79CAA2E9594DBE95E**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**LET'S ALL KEEP ELECTING REPUBLICANS PAC**

Mailing Address PO BOX 183

City HUDSON State WI Zip Code 54016-0183

FEC ID number of contributing federal political committee. **C** C00698092

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 14 / 2021

Transaction ID : **A3BE8AE1283C34860A5B**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MICHIGAN SUGAR COMPANY GROWERS PAC**

Mailing Address 122 UPTOWN DR  
UNIT 300

City BAY CITY State MI Zip Code 48708-5627

FEC ID number of contributing federal political committee. **C** C00384354

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2021

Transaction ID : **A95390FAF2E534B56BFA**

Amount of Each Receipt this Period  
 2500.00

Memo Item

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

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

4500.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 OF 108  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**MOLINA HEALTHCARE, INC. PAC**

Mailing Address 200 OCEANGATE  
STE 100

City LONG BEACH State CA Zip Code 90802-4317

FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 21 2021

Transaction ID : **A2BA97D6F849C4FF6977**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL APARTMENT ASSOCIATION PAC**

Mailing Address 4300 WILSON BLVD  
STE 400

City ARLINGTON State VA Zip Code 22203-4168

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

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

Transaction ID : **AC537177AC4F34C679FF**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF LETTER CARRIERS OF U.S.A. POLITICAL FUND (LETTER CARRIER POLITICAL FUND)

Mailing Address 100 INDIANA AVE NW

City WASHINGTON State DC Zip Code 20001-2143

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 21 2021

Transaction ID : **A6C3ED25D3D324E2F8EE**

Amount of Each Receipt this Period  
5000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION PAC**

Mailing Address 1101 KING ST.  
STE. 600

City ALEXANDRIA	State VA	Zip Code 22314-2965
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : A0F5B141F2F974A85A34**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL BIODIESEL BOARD PAC**

Mailing Address 605 CLARK AVE  
PO BOX 104898

City JEFFERSON CITY	State MO	Zip Code 65101-4158
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00484592

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : A9CB73068F4EC46F8BB5**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL CORN GROWERS ASSOC. PAC (CORN PAC)**

Mailing Address 20 F ST NW  
STE 600

City WASHINGTON	State DC	Zip Code 20001-6707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00376343

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

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

**Transaction ID : AC9B7E055E52B4CA8B94**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 108
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**NATSO INC. NATSO PAC**

Mailing Address 1330 BRADDOCK PL  
STE 501

City ALEXANDRIA State VA Zip Code 22314-1650

FEC ID number of contributing federal political committee. **C** C00097865

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : A986146F06B444DE48A3**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NSSGA ROCKPAC**

Mailing Address 66 CANAL CENTER PLZ  
STE 300

City ALEXANDRIA State VA Zip Code 22314-1576

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : A8EDAA936B52446748F7**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NUCOR CORPORATION PAC**

Mailing Address 1915 REXFORD RD

City CHARLOTTE State NC Zip Code 28211-3465

FEC ID number of contributing federal political committee. **C** C00379628

Name of Employer Occupation

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2021

**Transaction ID : A3748348FEF1642D9BF1**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 62 OF 108	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**PHILIPS NORTH AMERICA LLC PAC**

Mailing Address 1050 K ST NW  
STE 900

City WASHINGTON	State DC	Zip Code 20001-4460
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00239780

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

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

**Transaction ID : A0DEE99DF62E64D30B5B**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**POINT ACTION PAC, INC.**

Mailing Address PO BOX 420304

City ATLANTA	State GA	Zip Code 30342-0304
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00738260

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 12 / 2021

**Transaction ID : AB1A854926B26490EAA1**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**PROFESSIONAL AVIATION SAFETY SPECIALISTS PAC**

Mailing Address 1200 G ST NW  
STE 750

City WASHINGTON	State DC	Zip Code 20005-6702
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00286807

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : AC3E3A93E39464218A9F**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**PROFESSIONAL AVIATION SAFETY SPECIALISTS PAC**

Mailing Address 1200 G ST NW  
STE 750

City WASHINGTON	State DC	Zip Code 20005-6702
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00286807

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 3000.00

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

**Transaction ID : A0CC605BE214648E3821**

Amount of Each Receipt this Period  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**REALTORS PAC**

Mailing Address 430 N MICHIGAN AVE

City CHICAGO	State IL	Zip Code 60611-4011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2021

**Transaction ID : A7646D2E052924F52890**

Amount of Each Receipt this Period  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 2000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**RENEWABLE FUELS ASSOCIATION PAC (RENEWABLE FUELS PAC)**

Mailing Address 425 3RD ST SW  
STE 1150

City WASHINGTON	State DC	Zip Code 20024-3231
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00518910

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

**Transaction ID : A69A166795895408C9DF**

Amount of Each Receipt this Period  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 1000.00

Memo Item

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

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

\_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_ 4000.00

\_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address 325 7TH ST NW  
STE 610

City WASHINGTON	State DC	Zip Code 20004-2822
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
11 / 23 / 2021

**Transaction ID : AC3B8C6F75183451BB6D**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address 325 7TH ST NW  
STE 610

City WASHINGTON	State DC	Zip Code 20004-2822
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
12 / 21 / 2021

**Transaction ID : AFD5C19E201784350BE4**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SCALISE FOR CONGRESS**

Mailing Address PO BOX 23219

City NEW ORLEANS	State LA	Zip Code 70183-0219
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
12 / 21 / 2021

**Transaction ID : A40F2050DDB2C4D93A1D**

Amount of Each Receipt this Period  
2000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

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

FOR LINE NUMBER: PAGE 65 OF 108  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
SEAFARERS POLITICAL ACTIVITY DONATION - SEAFARERS INTERNATIONAL UNION OF NA-AGLIW

Mailing Address 5201 AUTH WAY

City: CAMP SPRINGS State: MD Zip Code: 20746-4211

FEC ID number of contributing federal political committee: **C** C00004325

Name of Employer: Occupation:

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **A8DD458C074764729979**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC**

Mailing Address 1155 15TH ST NW

City: WASHINGTON State: DC Zip Code: 20005-2706

FEC ID number of contributing federal political committee: **C** C00570226

Name of Employer: Occupation:

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2021

Transaction ID : **AF923E1FEA2B342F8905**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SOUTHWEST AIRLINES PILOTS ASSOCIATION PAC**

Mailing Address 1450 EMPIRE CENTRAL DR  
STE 737

City: DALLAS State: TX Zip Code: 75247-4081

FEC ID number of contributing federal political committee: **C** C00360669

Name of Employer: Occupation:

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 21 / 2021

Transaction ID : **A016A44D0861E4ECE885**

Amount of Each Receipt this Period  
 1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 3500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**SSAB AMERICAS PAC SSAB ENTERPRISES LLC**

Mailing Address 801 WARRENVILLE RD  
STE 800

City LISLE	State IL	Zip Code 60532-0912
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00513861

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 23 / 2021

**Transaction ID : A93D9B209CE2F45DABC9**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**STEEL MANUFACTURERS ASSOC. PAC (SMA PAC)**

Mailing Address 1150 CONNECTICUT AVE NW  
STE 715

City WASHINGTON	State DC	Zip Code 20036-4131
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00576470

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 23 / 2021

**Transaction ID : A67F0314F8BA54756A3B**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**SUPERVISORS PAC**

Mailing Address 1727 KING ST

City ALEXANDRIA	State VA	Zip Code 22314-2700
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00092957

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : A58E5E9DDF274444AA48**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY PAC**

Mailing Address 929 LONG BRIDGE DR

City ARLINGTON	State VA	Zip Code 22202-4208
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2021

**Transaction ID : A7C83431B8380434BB81**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**THE BOEING COMPANY PAC**

Mailing Address 929 LONG BRIDGE DR

City ARLINGTON	State VA	Zip Code 22202-4208
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2021

**Transaction ID : AE6D5457D34D24A94A6D**

Amount of Each Receipt this Period  
 1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**THE FARM CREDIT COUNCIL PAC**

Mailing Address 50 F ST NW  
STE 900

City WASHINGTON	State DC	Zip Code 20001-1530
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 28 / 2021

**Transaction ID : A78EC83E267404C2A9E4**

Amount of Each Receipt this Period  
 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 108	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**THE GUARDIAN FUND**

Mailing Address 2140 THREE M TRL

City DELAND	State FL	Zip Code 32720-1615
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00493221

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : AFF80B488F1C148978E7**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**UNITED MINE WORKERS OF AMERICA - COAL MINERS PAC**

Mailing Address 18354 QUANTICO GATEWAY DR  
STE 200

City TRIANGLE	State VA	Zip Code 22172-1779
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00013342

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 23 / 2021

**Transaction ID : A270EBE8EF5514E07B56**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**WINE & SPIRITS WHOLESALERS OF AMERICA PAC**

Mailing Address 805 15TH ST NW

City WASHINGTON	State DC	Zip Code 20005-2273
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer	Occupation
------------------	------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2021

**Transaction ID : AD86AB40038074BF4B64**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	135500.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ABH CONSULTING</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021		
Mailing Address 3410 ALABAMA AVE			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22305-1736	Amount of Each Disbursement this Period 11091.37		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B87C7AD53E4AB435B956		
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>B. ABH CONSULTING</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2021		
Mailing Address 3410 ALABAMA AVE			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22305-1736	Amount of Each Disbursement this Period 4103.65		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B8DB9B15F6FFF41D0B35		
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>C. ABH CONSULTING</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2021		
Mailing Address 3410 ALABAMA AVE			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22305-1736	Amount of Each Disbursement this Period 3870.67		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B7BC5618CEADB42DEB30		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	19065.69
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ACQUIRE DIGITAL, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2021
Mailing Address 2000 GLEN ECHO RD STE 200		FEC Identification Number C
City NASHVILLE	State TN	Zip Code 37215-2898
Purpose of Disbursement DIGITAL MARKETING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2500.00
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) ▼	
State: District:	Transaction ID : B8CD69D49FAF341DC8DD <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ACQUIRE DIGITAL, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2021
Mailing Address 2000 GLEN ECHO RD STE 200		FEC Identification Number C
City NASHVILLE	State TN	Zip Code 37215-2898
Purpose of Disbursement DIGITAL MARKETING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2500.00
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) ▼	
State: District:	Transaction ID : B9D8E24E481CC42D187A <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3.84
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B99F329D58C1F49DDA69 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5003.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 41.55
Office Sought: <input type="checkbox"/> House <input 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>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 10.05
Office Sought: <input type="checkbox"/> House <input 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>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2.25
Office Sought: <input type="checkbox"/> House <input 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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	53.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 19.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B07783D2E76664F51B82 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 2.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BA76CE10CF220457EA8E <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 19.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B82B2A9B885D043B29B8 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	41.85
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 85.05
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : <b>BED6D97572830471FA04</b>	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 4.51
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : <b>B6CC063089ABE4A0DA2D</b>	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 174.17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : <b>B8D75C36CFB3047F8B94</b>	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	263.73
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 1.28
Office Sought: <input type="checkbox"/> House <input 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>B. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 7.92
Office Sought: <input type="checkbox"/> House <input 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>C. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES		001
Candidate Name		Amount of Each Disbursement this Period 41.86
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	51.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ANEDOT</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021
Mailing Address 1340 POYDRAS ST, STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-5204
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 19.80
Office Sought: <input type="checkbox"/> House <input 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>B. ARISTOTLE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2021
Mailing Address 205 PENNSYLVANIA AVENUE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement SOFTWARE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1950.00
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ARISTOTLE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021
Mailing Address 205 PENNSYLVANIA AVENUE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1164
Purpose of Disbursement CC PROCESSING FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 25.00
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1994.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL CITY RESEARCH</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2021	
Mailing Address 135 JUPETER ST			FEC Identification Number C	
City HOLTS SUMMIT	State MO	Zip Code 65043-1193	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement RESEARCH		Category/ Type 001	Transaction ID : BF735C8883E64440AA71	
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>B. CAPITOL CITY RESEARCH</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2021	
Mailing Address 135 JUPETER ST			FEC Identification Number C	
City HOLTS SUMMIT	State MO	Zip Code 65043-1193	Amount of Each Disbursement this Period 4500.00	
Purpose of Disbursement RESEARCH		Category/ Type 001	Transaction ID : BFDA3F4D5F060499E92D	
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>C. CASEY'S GENERAL STORES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2021	
Mailing Address PO BOX 3001			FEC Identification Number C	
City ANKENY	State IA	Zip Code 50021-8045	Amount of Each Disbursement this Period 74.09	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type	Transaction ID : B99AB0F1CE2EF4AACB1D	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9074.09
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CASEY'S GENERAL STORES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2021		
Mailing Address PO BOX 3001			FEC Identification Number C		
City ANKENY	State IA	Zip Code 50021-8045	Amount of Each Disbursement this Period 42.26		
Purpose of Disbursement TRAVEL EXPENSE		Category/Type	Transaction ID : BE2557202EF07406689E		
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>B. CIRCLE K</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2021		
Mailing Address 150 N MILL STREET			FEC Identification Number C		
City NASHVILLE	State IL	Zip Code 62263-1739	Amount of Each Disbursement this Period 38.39		
Purpose of Disbursement TRAVEL EXPENSE		Category/Type	Transaction ID : B129E75B9657C446C95C		
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>C. CITICARDS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021		
Mailing Address PO BOX 6004			FEC Identification Number C		
City SIOUX FALLS	State SD	Zip Code 57117-6004	Amount of Each Disbursement this Period 2120.80		
Purpose of Disbursement SEE MEMO		Category/Type 001	Transaction ID : B98C87AB6C6564DCFB60		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2201.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021	
Mailing Address 1455 MARKET STREET #400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103-1355	Amount of Each Disbursement this Period 68.88	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B388DA3977C3640C6A3C	
Candidate Name		Memo Item <input checked="" 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>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 480.68	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BC842C9C3E52C432393C	
Candidate Name		Memo Item <input checked="" 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>C. GLOBAL GOURMET</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021	
Mailing Address 102 E JACKSON STREET			FEC Identification Number C	
City CARBONDALE	State IL	Zip Code 62901-1501	Amount of Each Disbursement this Period 804.73	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B574B92C499AF46459BF	
Candidate Name		Memo Item <input checked="" 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2021	
Mailing Address 4333 AMON CARTER BOULEVARD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 228.90	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : BD6ADA64347EC4757A46	
Candidate Name		Memo Item <input checked="" 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>B. CITICARDS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address PO BOX 6004			FEC Identification Number C	
City SIOUX FALLS	State SD	Zip Code 57117-6004	Amount of Each Disbursement this Period 4015.55	
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : B917C469150084238A27	
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>C. PRICELINE.COM</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address 800 CONNECTICUT AVENUE			FEC Identification Number C	
City NORWALK	State CT	Zip Code 06854-1631	Amount of Each Disbursement this Period 888.02	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : B120074A0D93C4EAD9D5	
Candidate Name		Memo Item <input checked="" 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4015.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 161.90	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BE21F9218F5214FED928	
Candidate Name		Memo Item <input checked="" 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>B. VINO VOLO</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address LABERT AIRPORT			FEC Identification Number C	
City SAINT LOUIS	State MO	Zip Code 63145	Amount of Each Disbursement this Period 126.22	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : BC59555A045AD420DA41	
Candidate Name		Memo Item <input checked="" 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>C. UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address 1455 MARKET STREET #400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103-1355	Amount of Each Disbursement this Period 349.17	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B434BF208DE084427ACC	
Candidate Name		Memo Item <input checked="" 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021		
Mailing Address LAMBERT INTERNATIONAL AIRPORT			FEC Identification Number C		
City ST. LOUIS	State MO	Zip Code 63100	Amount of Each Disbursement this Period 100.79		
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : BD5FB6A9063FF401B8AD		
Candidate Name		<input checked="" 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>B. AMBAR</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021		
Mailing Address 523 8TH ST SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-2835	Amount of Each Disbursement this Period 662.43		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B0A91F3FE89F8460D9B8		
Candidate Name		<input checked="" 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>C. RITZ CARLTON</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021		
Mailing Address 455 GRAND BAY DR.			FEC Identification Number C		
City KEY BISCAVNE	State FL	Zip Code 33149-1900	Amount of Each Disbursement this Period 89.46		
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : B2499790C87EF464FB46		
Candidate Name		<input checked="" 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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. COURTYARD BY MARRIOTT</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address 165 E ONTARIO STREET			FEC Identification Number C	
City CHICAGO	State IL	Zip Code 60611-2822	Amount of Each Disbursement this Period 390.15	
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : B3362B2F7F9034B93A3A	
Candidate Name		Memo Item <input checked="" 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>B. NEW CONGRESSIONAL LIQUOR</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address 401 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1827	Amount of Each Disbursement this Period 71.68	
Purpose of Disbursement EVENT BEVERAGES		Category/ Type 001	Transaction ID : B5C84BD6206E64CB4A21	
Candidate Name		Memo Item <input checked="" 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>C. BEACHSIDE RESTAURANT</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address 14160 PALAWAN WAY			FEC Identification Number C	
City MARINA DEL REY	State CA	Zip Code 90292-6231	Amount of Each Disbursement this Period 382.55	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B245F6B1C5EF9415E896	
Candidate Name		Memo Item <input checked="" 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2021	
Mailing Address 4333 AMON CARTER BOULEVARD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 284.87	
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : BFB701DE8827143228E9	
Candidate Name		Memo Item <input checked="" 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>B. CITICARDS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021	
Mailing Address PO BOX 6004			FEC Identification Number C	
City SIOUX FALLS	State SD	Zip Code 57117-6004	Amount of Each Disbursement this Period 8035.30	
Purpose of Disbursement SEE MEMO		Category/ Type 001	Transaction ID : B8D386AF0841346A0A6A	
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>C. NEW CONGRESSIONAL LIQUOR</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021	
Mailing Address 401 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1827	Amount of Each Disbursement this Period 235.82	
Purpose of Disbursement EVENT BEVERAGES		Category/ Type 001	Transaction ID : B23660DF69FBD448695D	
Candidate Name		Memo Item <input checked="" 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8035.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CITICARDS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021	
Mailing Address PO BOX 6004			FEC Identification Number C	
City SIOUX FALLS	State SD	Zip Code 57117-6004	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement FINANCE CHARGES/MEMBERSHIP FEES		Category/ Type 001	Transaction ID : BC59C4F77AFD742CC9D9	
Candidate Name			<input checked="" 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>B. BULLFEATHERS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021	
Mailing Address 410 1ST STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003-1819	Amount of Each Disbursement this Period 136.94	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B701060EF236A49DDA09	
Candidate Name			<input checked="" 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>C. UBER TECHNOLOGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021	
Mailing Address 1455 MARKET STREET #400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103-1355	Amount of Each Disbursement this Period 871.33	
Purpose of Disbursement TRAVEL EXPENSE		Category/ Type 001	Transaction ID : B63594BB367F74C82BFD	
Candidate Name			<input checked="" 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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021		
Mailing Address 300 FIRST ST SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 648.70		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B5CB4114D7E8C4CEE61		
Candidate Name		Memo Item <input checked="" 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>B. MARRIOTT COURTYARD</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021		
Mailing Address 370 NO. RTE 83			FEC Identification Number C		
City ELMHURST	State IL	Zip Code 60126	Amount of Each Disbursement this Period 1014.27		
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : BE90ED154DC50435E8B8		
Candidate Name		Memo Item <input checked="" 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>C. CELEBRATIONS RESTAURANT</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021		
Mailing Address 615 BELLEVUE ST			FEC Identification Number C		
City CAPE GIRARDEAU	State MO	Zip Code 63701-5603	Amount of Each Disbursement this Period 522.13		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B9F559C5A54604F2B931		
Candidate Name		Memo Item <input checked="" 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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021		
Mailing Address 4333 AMON CARTER BOULEVARD			FEC Identification Number C		
City FORT WORTH	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 176.80		
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : B26038FA1CD8C49BA80E		
Candidate Name		Memo Item <input checked="" 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>B. CAPITOL HILL HOTEL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021		
Mailing Address 200 C ST SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003-1909	Amount of Each Disbursement this Period 1734.90		
Purpose of Disbursement LODGING		Category/ Type 001	Transaction ID : BE0126D20DAB34BE98AF		
Candidate Name		Memo Item <input checked="" 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>C. CAPITAL GRILLE</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021		
Mailing Address 601 PENNSYLVANIA AVENUE NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20004-2601	Amount of Each Disbursement this Period 175.75		
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	Transaction ID : B56376A9845FE4BE9853		
Candidate Name		Memo Item <input checked="" 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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021		
Mailing Address LAMBERT INTERNATIONAL AIRPORT			FEC Identification Number C		
City ST. LOUIS	State MO	Zip Code 63100	Amount of Each Disbursement this Period 110.18		
Purpose of Disbursement AIRFARE		Category/ Type 001	Transaction ID : B909C67E418D649F78BB		
Candidate Name		<input checked="" 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>B. DEL FRISCO'S</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021		
Mailing Address 950 I STREET NORTHWEST #501			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20001-4959	Amount of Each Disbursement this Period 1304.35		
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : B42611DD4BB35491E8D8		
Candidate Name		<input checked="" 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>C. CONGRESSIONAL INSTITUTE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2021		
Mailing Address 1700 DIAGONAL ROAD #730			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22314-2843	Amount of Each Disbursement this Period 390.44		
Purpose of Disbursement CONFERENCE FEES		Category/ Type 001	Transaction ID : B4FB78BA173134ED382A		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	390.44
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. DUNBAR BUILDERS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2021	
Mailing Address 2504 WESTINGHOUSE DR			FEC Identification Number C	
City BELLEVILLE	State IL	Zip Code 62221-3538	Amount of Each Disbursement this Period 16250.00	
Purpose of Disbursement OFFICE RENT/DEPOSIT		Category/ Type 001	Transaction ID : B592FBE7D25014E809CA	
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>B. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2021	
Mailing Address 10 10TH ST NW #600			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30309	Amount of Each Disbursement this Period 42.00	
Purpose of Disbursement WEB SERVICES		Category/ Type 001	Transaction ID : BC52F7A4157AB465ABA6	
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>C. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2021	
Mailing Address 10 10TH ST NW #600			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30309	Amount of Each Disbursement this Period 42.00	
Purpose of Disbursement WEB SERVICES		Category/ Type 001	Transaction ID : B400D149EF99C4F9189C	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	16334.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2021		
Mailing Address 10 10TH ST NW #600			FEC Identification Number C		
City ATLANTA	State GA	Zip Code 30309	Amount of Each Disbursement this Period 42.00		
Purpose of Disbursement WEB SERVICES		Category/ Type 001	Transaction ID : BD236110BB5A147BFAAB		
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>B. ILLINOIS DEPARTMENT OF REVENUE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021		
Mailing Address PO BOX 19052			FEC Identification Number C		
City SPRINGFIELD	State IL	Zip Code 62794-9052	Amount of Each Disbursement this Period 33.00		
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : BC9902FC7AC0646988E9		
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>C. ILLINOIS DEPARTMENT OF REVENUE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2021		
Mailing Address PO BOX 19052			FEC Identification Number C		
City SPRINGFIELD	State IL	Zip Code 62794-9052	Amount of Each Disbursement this Period 33.00		
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : B0A1C4CB3DCEE4C6B8DF		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	108.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ILLINOIS DEPARTMENT OF REVENUE</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2021	
Mailing Address PO BOX 19052			FEC Identification Number C	
City SPRINGFIELD	State IL	Zip Code 62794-9052	Amount of Each Disbursement this Period 272.26	
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : B7175965DC96648C285B	
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>B. INTERNAL REVENUE SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2021	
Mailing Address PO BOX 70503			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28272	Amount of Each Disbursement this Period 136.02	
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : BC6268BBC0DBF46C08E8	
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>C. INTERNAL REVENUE SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2021	
Mailing Address PO BOX 70503			FEC Identification Number C	
City CHARLOTTE	State NC	Zip Code 28272	Amount of Each Disbursement this Period 136.00	
Purpose of Disbursement PAYROLL TAXES		Category/ Type 001	Transaction ID : BB3402BACBB214CF0A01	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	544.28
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. INTERNAL REVENUE SERVICE</b>		Date of Disbursement
Mailing Address PO BOX 70503		M M / D D / Y Y Y Y 12 / 14 / 2021
City CHARLOTTE	State NC	Zip Code 28272
Purpose of Disbursement PAYROLL TAXES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BD1141329068C4A9987C	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. KAP PRINT, LLC</b>		Date of Disbursement
Mailing Address 3565 S LAS VEGAS STE 306		M M / D D / Y Y Y Y 11 / 04 / 2021
City LAS VEGAS	State NV	Zip Code 89109-8919
Purpose of Disbursement PRINTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B4AAE01F3558B46B5815	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. KAP PRINT, LLC</b>		Date of Disbursement
Mailing Address 3565 S LAS VEGAS STE 306		M M / D D / Y Y Y Y 11 / 22 / 2021
City LAS VEGAS	State NV	Zip Code 89109-8919
Purpose of Disbursement PRINTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B0C007396FB964043ACC	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13372.04
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. KAP STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021		
Mailing Address 229 EVANS LANE			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22305-3002	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : B93B915C403CC4EBDB67		
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>B. KAP STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2021		
Mailing Address 229 EVANS LANE			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22305-3002	Amount of Each Disbursement this Period 4000.00		
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : B7590E4C2DE634CE987A		
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>C. KAP STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2021		
Mailing Address 229 EVANS LANE			FEC Identification Number C		
City ALEXANDRIA	State VA	Zip Code 22305-3002	Amount of Each Disbursement this Period 4000.00		
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : B6C011D64542D4385BC8		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. KAP STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2021
Mailing Address 229 EVANS LANE			FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22305-3002	Amount of Each Disbursement this Period 980.91
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001	Transaction ID : BCAC41373062442A9B4F
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. MEDIACOM</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2021
Mailing Address 300 E MAIN STREET SUITE 21			FEC Identification Number C
City CARBONDALE	State IL	Zip Code 62901-3029	Amount of Each Disbursement this Period 51.82
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : BC47847C9948C4457B39
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. MEDIACOM</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2021
Mailing Address 300 E MAIN STREET SUITE 21			FEC Identification Number C
City CARBONDALE	State IL	Zip Code 62901-3029	Amount of Each Disbursement this Period 51.56
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : BEE01246A4B5B47BC85A
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1084.29
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MEDIACOM</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2021	
Mailing Address 300 E MAIN STREET SUITE 21			FEC Identification Number C	
City CARBONDALE	State IL	Zip Code 62901-3029	Amount of Each Disbursement this Period 51.56	
Purpose of Disbursement INTERNET		Category/ Type 001	Transaction ID : BBE2098DD19BB4C75968	
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>B. MGS CONSULTING</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2021	
Mailing Address 714 ELMTREE LN			FEC Identification Number C	
City KIRKWOOD	State MO	Zip Code 63122-3602	Amount of Each Disbursement this Period 3650.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B84CAA7820A4C4E8AA2A	
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>C. MORGAN AND GUTHMAN LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2021	
Mailing Address 217 ROBERT MORGAN ROAD			FEC Identification Number C	
City MURPHYSBORO	State IL	Zip Code 62966-6117	Amount of Each Disbursement this Period 110.00	
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type 001	Transaction ID : B9686422AB46B4233A69	
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3811.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. NELSON, MYLES, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2021		
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C		
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 274.34		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : B13654D7B1ACF487EB87		
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>B. NELSON, MYLES, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2021		
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C		
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 274.32		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BC51B1348DFA14DD79B2		
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>C. NELSON, MYLES, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2021		
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C		
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 2011.50		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BD450C6C7F6594CB4899		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2560.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. NELSON, MYLES, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2021		
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C		
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 2011.49		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : BC65F897BB5C84EEF984		
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>B. NELSON, MYLES, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2021		
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C		
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 2011.50		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : B77619591D730409DA45		
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>C. NELSON, MYLES, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2021		
Mailing Address 307 AUTUMN RIDGE DR			FEC Identification Number C		
City COLLINSVILLE	State IL	Zip Code 62234-2331	Amount of Each Disbursement this Period 2011.49		
Purpose of Disbursement SALARY		Category/ Type 001	Transaction ID : B49F0CCE1D812453DBF2		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6034.48
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. POLAR INVESTMENTS AND INSURANCE SERVICES INC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2021
Mailing Address 300 E MAIN STREET SUITE 1		FEC Identification Number C
City CARBONDALE	State IL	Zip Code 62901-3029
Purpose of Disbursement BOOKKEEPING SERVICE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 600.00
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) ▼	
State: District:	Transaction ID : B57DBD4F8F23A4698A35 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. POLAR INVESTMENTS AND INSURANCE SERVICES INC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2021
Mailing Address 300 E MAIN STREET SUITE 1		FEC Identification Number C
City CARBONDALE	State IL	Zip Code 62901-3029
Purpose of Disbursement BOOKKEEPING SERVICE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 600.00
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) ▼	
State: District:	Transaction ID : B7B50429BA66E4F458F5 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. POLAR INVESTMENTS AND INSURANCE SERVICES INC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2021
Mailing Address 300 E MAIN STREET SUITE 1		FEC Identification Number C
City CARBONDALE	State IL	Zip Code 62901-3029
Purpose of Disbursement BOOKKEEPING SERVICE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 600.00
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) ▼	
State: District:	Transaction ID : B8A0BACA465934826A81 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. POSTMASTER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2021
Mailing Address 475 LENFANT PLAZA SW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20260-0004
Purpose of Disbursement POSTAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 70.00
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) ▼	
State: District:	Transaction ID : B28D32F86931A4E16B40 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. PROFESSIONAL DATA SERVICES, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2021
Mailing Address 824 S. MILLEDGE AVE. SUITE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1525.00
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) ▼	
State: District:	Transaction ID : B9DB7D4DE1C034469A73 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. PROFESSIONAL DATA SERVICES, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2021
Mailing Address 824 S. MILLEDGE AVE. SUITE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1527.12
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B5A2ADBE9B9B1499FAA1 <input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3122.12
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. PROFESSIONAL DATA SERVICES, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2021
Mailing Address 824 S. MILLEDGE AVE. SUITE 101		FEC Identification Number C
City ATHENS	State GA	Zip Code 30605-1332
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 1525.00	
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) ▼	
State: District:	Transaction ID : B8F975C710C204D94B83	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. SAM'S CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2021
Mailing Address 2709 WALTON WAY		FEC Identification Number C
City MARION	State IL	Zip Code 62959-4901
Purpose of Disbursement EVENT SUPPLIES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 66.67	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : BF326B3AA6D0740F889A	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. SCHWEBEL PRINTING</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2021
Mailing Address 1408 WALNUT STREET		FEC Identification Number C
City MURPHYSBORO	State IL	Zip Code 62966-2030
Purpose of Disbursement PRINTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 210.00	
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) ▼	
State: District:	Transaction ID : BA1EB862416D94B368E5	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1801.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 108	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2021
Mailing Address PO BOX 9688		FEC Identification Number C
City MISSION HILLS	State CA	Zip Code 91346-9688
Purpose of Disbursement TELEPHONE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 218.74	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B57F4638F2D3A4832ABC	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2021
Mailing Address PO BOX 9688		FEC Identification Number C
City MISSION HILLS	State CA	Zip Code 91346-9688
Purpose of Disbursement TELEPHONE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 218.52	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B76522F5C9C654DB0A97	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2021
Mailing Address PO BOX 9688		FEC Identification Number C
City MISSION HILLS	State CA	Zip Code 91346-9688
Purpose of Disbursement TELEPHONE	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 285.89	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : B7D204E9AC6EF4B29A28	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	723.15
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. WHIMSEY PHOTOGRAPHY</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2021		
Mailing Address 15 N 13TH STREET			FEC Identification Number C		
City MURPHYSBORO	State IL	Zip Code 62966-2058	Amount of Each Disbursement this Period 453.33		
Purpose of Disbursement EVENT PHOTOGRAPHY		Category/ Type 001	Transaction ID : B5ADBC7535B6949C2A4F		
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>B. WINNING SYSTEMS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2021		
Mailing Address 105 S YORK STREET FLOOR 5			FEC Identification Number C		
City ELMHURST	State IL	Zip Code 60126-3455	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BBC68981AE4C544B8B4C		
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>C. WINNING SYSTEMS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2021		
Mailing Address 105 S YORK STREET FLOOR 5			FEC Identification Number C		
City ELMHURST	State IL	Zip Code 60126-3455	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : B3DE524D9C8FB439BB3B		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2453.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. WINNING SYSTEMS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2021		
Mailing Address 105 S YORK STREET FLOOR 5			FEC Identification Number C		
City ELMHURST	State IL	Zip Code 60126-3455	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001	Transaction ID : BEBFA14DBF4B94DD295E		
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>B. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 2.04		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B916FC6C17BC244E68E9		
Candidate Name WINRED		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>C. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 0.19		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B405F14C83F494B1FB27		
Candidate Name WINRED		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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1002.23
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 18.74		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B43DDDA138BAB420E982		
Candidate Name WINRED		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>B. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 44.46		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B571DF7E03AC9489CA5B		
Candidate Name WINRED		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>C. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 21.34		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BD6A28FA0AB6B47B7834		
Candidate Name WINRED		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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	84.54
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 5.28		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BE14C168FA6A54F7D9BB		
Candidate Name WINRED		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>B. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 5.83		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B04772043DBAF49CE943		
Candidate Name WINRED		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>C. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 11.19		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B83BDAFB7FCCC4712A82		
Candidate Name WINRED		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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	22.30
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 108			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 30.55		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : B03571530C2DA469EB72		
Candidate Name WINRED		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>B. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 16.99		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BEA2AB2A3A0714F0CAC4		
Candidate Name WINRED		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>C. WINRED</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2021		
Mailing Address PO BOX 9891			FEC Identification Number C C00694323		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Disbursement this Period 5.40		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001	Transaction ID : BF4EFDA32345D4BAEAF4		
Candidate Name WINRED		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: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	52.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 108			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2021
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES		001 Category/ Type
Candidate Name WINRED		Amount of Each Disbursement this Period 14.23
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B363FFD4DCD554EA49E4
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES		001 Category/ Type
Candidate Name WINRED		Amount of Each Disbursement this Period 66.54
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B5C2AED2DD403465E923
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. WINRED</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2021
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219-1891
Purpose of Disbursement CC TRANSACTION FEES		001 Category/ Type
Candidate Name WINRED		Amount of Each Disbursement this Period 55.16
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9AAC0AB6990041B585E
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	135.93
<b>TOTAL</b> This Period (last page this line number only).....▶	115238.67

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 108			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MIKE'S I LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2021		
Mailing Address 109 VELMA AVE					
City SOUTH ROXANA	State IL	Zip Code 62087-1528	FEC Identification Number C		
Purpose of Disbursement REFUND		Category/ Type 010	Amount of Each Disbursement this Period 2250.00		
Candidate Name		Transaction ID : B87EFF72A9BF94E3A97B			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period		
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>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement		Category/ Type	Amount of Each Disbursement this Period		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2250.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 108	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2021	
Mailing Address 320 1ST STREET SE			FEC Identification Number C C00075820	
City WASHINGTON	State DC	Zip Code 20003-1838	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement CONTRIBUTION		Category/ Type 011	Transaction ID : B867D4C76DECE4DF8B33	
Candidate Name NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE	Disbursement For: 2022		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00