

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

MISES PAC

ADDRESS (number and street) PO BOX 2183

Check if different than previously reported. (ACC) NORRISTOWN PA 19401

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00699785

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |                                                                |
|--------------------------------------|--------------------------------------|---------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |                                           |                                                   |                                       |
|-------------------------------------------|---------------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S)            |                                       |

Election on 11 / 03 / 2020 in the State of  

- (d) 30-Day POST-Election Report for the:
- |                                        |                                       |                                        |
|----------------------------------------|---------------------------------------|----------------------------------------|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|----------------------------------------|---------------------------------------|----------------------------------------|

Election on   /   /   in the State of  

5. Covering Period 10 / 01 / 2020 through 10 / 14 / 2020

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

Burton, Kyle, , ,

Type or Print Name of Treasurer

Signature of Treasurer Burton, Kyle, , , [Electronically Filed] Date 10 / 21 / 2020

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**MISES PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value=""/>	<input type="text" value="6001.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3781.34"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="1875.16"/>	<input type="text" value="55148.19"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="5656.50"/>	<input type="text" value="61149.24"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1988.90"/>	<input type="text" value="57481.64"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3667.60"/>	<input type="text" value="3667.60"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**MISES PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2020 To: M M / D D / Y Y Y Y 10 / 14 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	225.00	13963.05
(ii) Unitemized .....	1601.96	37631.42
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1826.96	51594.47
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	1826.96	51594.47
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	48.20	3553.72
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1875.16	55148.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1875.16	55148.19

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1388.90	41331.64
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1388.90	41331.64
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2300.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	600.00	13850.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1988.90	57481.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1988.90	57481.64

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	1826.96	51594.47
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1826.96	51594.47
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1388.90	41331.64
37. Offsets to Operating Expenditures (from Line 15, page 3).....	48.20	3553.72
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1340.70	37777.92

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**MISES PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Combs, Anthony, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 05 / 2020
Mailing Address 931 Fletcher Avenue 212		<b>Transaction ID : SA11AI.6331</b>
City Indianapolis	State IN	Zip Code 46203
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Elanco	Occupation (for Individual) Sr. Analyst	<input type="checkbox"/> Memo Item
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ingalls, Benjamin, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 12 / 2020
Mailing Address 132 Ingalls Pond Rd		<b>Transaction ID : SA11AI.6401</b>
City Milford	State NY	Zip Code 13807
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer (for Individual) Self	Occupation (for Individual) Contractor	<input type="checkbox"/> Memo Item
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Taylor, Daniel, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 14 / 2020
Mailing Address 7542 East 24th Street		<b>Transaction ID : SA11AI.6424</b>
City Tucson	State AZ	Zip Code 85710
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) na	Occupation (for Individual) na	<input type="checkbox"/> Memo Item
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<b>TOTAL</b> This Period (last page this line number only).....▶	225.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras Street  
Suite 1770

City New Orleans State LA Zip Code 70112-5204

Purpose of Disbursement Donation processing fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6452

Amount of Each Disbursement this Period: 114.76

Memo Item

**B. Aristotle**

Full Name (Last, First, Middle Initial)

Mailing Address 205 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Technology services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 05 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6442

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. Drip**

Full Name (Last, First, Middle Initial)

Mailing Address 251 N. 1st Avenue, Suite 400

City Minneapolis State MN Zip Code 55401

Purpose of Disbursement Technology services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 13 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6440

Amount of Each Disbursement this Period: 122.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 736.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. GearBubble**

Full Name (Last, First, Middle Initial)

Mailing Address 6440 Sky Pointe Dr. #140-361

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement Merchandise

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 05 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6435

Amount of Each Disbursement this Period: 11.90

Memo Item

**B. GearBubble**

Full Name (Last, First, Middle Initial)

Mailing Address 6440 Sky Pointe Dr. #140-361

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement Merchandise

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6428

Amount of Each Disbursement this Period: 11.90

Memo Item

**C. GearBubble**

Full Name (Last, First, Middle Initial)

Mailing Address 6440 Sky Pointe Dr. #140-361

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement Merchandise

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6429

Amount of Each Disbursement this Period: 15.89

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 39.69

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

Full Name (Last, First, Middle Initial)

### A. GearBubble

Mailing Address 6440 Sky Pointe Dr. #140-361

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement  
Merchandise

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2020

FEC Identification Number

C

Transaction ID : SB21B.6431

Amount of Each Disbursement this Period

11.90

Memo Item

Full Name (Last, First, Middle Initial)

### B. GearBubble

Mailing Address 6440 Sky Pointe Dr. #140-361

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement  
Merchandise

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2020

FEC Identification Number

C

Transaction ID : SB21B.6432

Amount of Each Disbursement this Period

15.89

Memo Item

Full Name (Last, First, Middle Initial)

### C. GearBubble

Mailing Address 6440 Sky Pointe Dr. #140-361

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement  
Merchandise

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2020

FEC Identification Number

C

Transaction ID : SB21B.6433

Amount of Each Disbursement this Period

13.89

Memo Item

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

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

41.68

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. GearBubble**

Full Name (Last, First, Middle Initial)

Mailing Address 6440 Sky Pointe Dr. #140-361

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement Merchandise

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6434

Amount of Each Disbursement this Period: 11.90

Memo Item

**B. GearBubble**

Full Name (Last, First, Middle Initial)

Mailing Address 6440 Sky Pointe Dr. #140-361

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement Merchandise

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6436

Amount of Each Disbursement this Period: 11.90

Memo Item

**C. GearBubble**

Full Name (Last, First, Middle Initial)

Mailing Address 6440 Sky Pointe Dr. #140-361

City Las Vegas State NV Zip Code 89131

Purpose of Disbursement Merchandise

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6437

Amount of Each Disbursement this Period: 9.90

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 33.70

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. Specs Wines Spirits Finer Foods**

Full Name (Last, First, Middle Initial)

Mailing Address 2410 Smith St

City Houston State TX Zip Code 77006

Purpose of Disbursement Commemorative political figure food & beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement: 10 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B.6451

Amount of Each Disbursement this Period: 251.30

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	251.30
<b>TOTAL</b> This Period (last page this line number only).....▶	1103.13

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MISES PAC**

**A. Chris Klavetter for Mayor**

Full Name (Last, First, Middle Initial)

Mailing Address 500 Interlachen Road

City Burnsville State MN Zip Code 55305

Purpose of Disbursement Non-federal candidate contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2020

FEC Identification Number: C

Transaction ID : SB29.6455

Amount of Each Disbursement this Period: 600.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	600.00