

# 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**

WITH HONOR PAC

ADDRESS (number and street) PO BOX 1843

Check if different than previously reported. (ACC)

ALEXANDRIA VA 22313

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

**C** C00661272

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:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 01 / 01 / 2023 through [MM] / [DD] / [YYYY] 06 / 30 / 2023

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

KOCH, TIMOTHY, A., ,

Type or Print Name of Treasurer

Signature of Treasurer KOCH, TIMOTHY, A., , [Electronically Filed] Date [MM] / [DD] / [YYYY] 07 / 28 / 2023

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**WITH HONOR 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="2023"/>		<input type="text" value="44506.21"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="44506.21"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="205322.00"/>	<input type="text" value="205322.00"/>
(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="249828.21"/>	<input type="text" value="249828.21"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="199760.50"/>	<input type="text" value="199760.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="50067.71"/>	<input type="text" value="50067.71"/>
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

Write or Type Committee Name

**WITH HONOR PAC**

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

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).....	184750.00	184750.00
(ii) Unitemized .....	572.00	572.00
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	185322.00	185322.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	205322.00	205322.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	205322.00	205322.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	205322.00	205322.00

**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 .....	11964.19	11964.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	11964.19	11964.19
22. Transfers to Affiliated/Other Party Committees.....	83296.31	83296.31
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	93500.00	93500.00
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).....	11000.00	11000.00
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)) ..	199760.50	199760.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	199760.50	199760.50

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	205322.00	205322.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	205322.00	205322.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	11964.19	11964.19
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	11964.19	11964.19

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**WITH HONOR PAC**

**A. Bos, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 656 5th Avenue N  
 City Naples State FL Zip Code 34102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 23 / 2023  
**Transaction ID : SA11AI.7528**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**B. Brierley, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4324 St. Johns Dr  
 City Dallas State TX Zip Code 75205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2023  
**Transaction ID : SA11AI.7490**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**C. Brierley, Harold, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4324 St Johns Dr  
 City Dallas State TX Zip Code 75205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Brierley Group, LLC Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2023  
**Transaction ID : SA11AI.7489**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 48
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Byrd, Kahlil, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 City Point  
 City Brooklyn State NY Zip Code 11201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Invest America Occupation (for Individual) Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 22 / 2023  
**Transaction ID : SA11AI.7435**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

**B. Clayton, Katie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 903 Vance St  
 City Raleigh State NC Zip Code 27608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) LCSW  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 25 / 2023  
**Transaction ID : SA11AI.7444**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Cooper-Bos, Sissel, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 656 5th Ave. N  
 City Naples State FL Zip Code 34102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 23 / 2023  
**Transaction ID : SA11AI.7527**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Crowley, Aileen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10303 Summer Meadow Way  
 City Golden Oak State FL Zip Code 32836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2023  
**Transaction ID : SA11AI.7498**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**B. Crowley, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10303 Summer Meadow Way  
 City Golden Oak State FL Zip Code 32836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Amicus Therapeutics, Inc Occupation (for Individual) Executive Chairman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2023  
**Transaction ID : SA11AI.7501**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**C. Cumbers, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2419 Cherry Hills Dr.  
 City Lafayette State CA Zip Code 94549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Synbiobeta Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 28 / 2023  
**Transaction ID : SA11AI.7447**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 48
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Dixon, Donald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62 Linda Vista Ave  
 City Atherton State CA Zip Code 94027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ForgePoint Capital Occupation (for Individual) Venture Capital  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 07 / 2023**  
**Transaction ID : SA11AI.7477**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Dixon, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 62 Linda Vista Avenue  
 City Atherton State CA Zip Code 94027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 07 / 2023**  
**Transaction ID : SA11AI.7478**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Dixon, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 242 Corte Madera Rd  
 City Portola Valley State CA Zip Code 94028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Second Front Systems, Inc. Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 22 / 2023**  
**Transaction ID : SA11AI.7474**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Eskew, Tucker, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 207 West Masonic View Avenue  
 City Alexandria State VA Zip Code 22301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vianovo, LP Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 01 / 2023**  
**Transaction ID : SA11AI.7456**  
 Amount of Each Receipt this Period 250.00  
 Memo Item Contribution

**B. Flavin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3900 S Colorado Blvd  
 City Englewood State CO Zip Code 80113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Concord Energy Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 23 / 2023**  
**Transaction ID : SA11AI.7439**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Foshee, Doug, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3504 Georgetown Street  
 City Houston State TX Zip Code 77005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sallyport Investments Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **01 / 25 / 2023**  
**Transaction ID : SA11AI.7440**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Foshee, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3504 Georgetown Street  
 City Houston State TX Zip Code 77005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 01 / 25 / 2023  
**Transaction ID : SA11AI.7441**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**B. Gates, Robert, M., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 346  
 City Sedro-Woolley State WA Zip Code 98284  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 01 / 31 / 2023  
**Transaction ID : SA11AI.7454**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**C. George, William, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2284 W Lake of the Isles Pkwy  
 City Minneapolis State MN Zip Code 55405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 04 / 17 / 2023  
**Transaction ID : SA11AI.7547**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Gwak, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 943 22nd Avenue East  
 City Seattle State WA Zip Code 98112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Point72 Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2023  
**Transaction ID : SA11AI.7517**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**B. Hankin, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 27  
 City Butler State MD Zip Code 21023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2023  
**Transaction ID : SA11AI.7559**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**C. Hankin, Michael, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 27  
 City Butler State MD Zip Code 21023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brown Advisory Occupation (for Individual) CEO & Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 25 / 2023  
**Transaction ID : SA11AI.7560**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Hanover, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5517 Shady Grove Terrace  
 City Memphis State TN Zip Code 38120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Union Main Group LLC Occupation (for Individual) Private Equity  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 06 / 2023**  
**Transaction ID : SA11AI.7467**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Howard, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11810 N 120th Street  
 City Scottsdale State AZ Zip Code 85259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ASU Occupation (for Individual) University Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **01 / 22 / 2023**  
**Transaction ID : SA11AI.7436**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

**C. Jablov, Igor, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3316 White Oak Road  
 City Raleigh State NC Zip Code 27609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pryn Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 24 / 2023**  
**Transaction ID : SA11AI.7558**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Johnson, Eugene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 920 Berkeley Ave  
 City Charlotte State NC Zip Code 28203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 26 / 2023  
**Transaction ID : SA11AI.7521**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Kaplan, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1918 N. Olive Street #3401  
 City Dallas State TX Zip Code 75201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Businessman/Philanthropist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 10 / 2023  
**Transaction ID : SA11AI.7577**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Kemp, Giles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 150 East Robinson Street  
 City Orlando State FL Zip Code 32801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 12 / 2023  
**Transaction ID : SA11AI.7541**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Martinez, Walfrido, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 135 Nod Rd  
 City Ridgefield State CT Zip Code 06877  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hunton Andrews Kurth LLP Occupation (for Individual) Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2023  
**Transaction ID : SA11AI.7464**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**B. McMaster, Herbert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2020 East Balboa Boulevard  
 City Newport Beach State CA Zip Code 92661  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Stanford University Occupation (for Individual) Senior Fellow  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 23 / 2023  
**Transaction ID : SA11AI.7437**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item Contribution

**C. Morton, Patricia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 Hempstead Place  
 City Charlotte State NC Zip Code 28207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 30 / 2023  
**Transaction ID : SA11AI.7452**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Morton, Thruston, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 Hempstead Place  
 City Charlotte State NC Zip Code 28207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 30 / 2023  
**Transaction ID : SA11AI.7453**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**B. O'Malley, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 33 3rd Ave  
 City Boston State MA Zip Code 02129  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 08 / 2023  
**Transaction ID : SA11AI.7429**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item Contribution

**C. Platt, Laurie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 Glen Abbey Dr.  
 City Dallas State TX Zip Code 75248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2023  
**Transaction ID : SA11AI.7495**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Platt, Todd, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 28 Glen Abbey Dr.  
 City Dallas State TX Zip Code 75248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hillwood Investments Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 17 / 2023  
**Transaction ID : SA11AI.7496**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**B. Razek, Ed, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10920 Gorsuch Road  
 City Galena State OH Zip Code 43021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2023  
**Transaction ID : SA11AI.7608**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**C. Roth, Bill, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2164 Cottle Ave Suite 800  
 City San Jose State CA Zip Code 95125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Second Front Systems, Inc Occupation (for Individual) Marketing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2023  
**Transaction ID : SA11AI.7582**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Sheehan, Nina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8301 Fairview Road  
 City Charlotte State NC Zip Code 28226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 03 / 2023**  
**Transaction ID : SA11AI.7536**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Sheehan, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8301 Fairview Road  
 City Charlotte State NC Zip Code 28226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Elevation Securities Occupation (for Individual) Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 03 / 2023**  
**Transaction ID : SA11AI.7535**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Taylor, Dylan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Lilhaven Lane  
 City Littleton State CO Zip Code 80123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Voyager Space Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 11 / 2023**  
**Transaction ID : SA11AI.7487**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Thiel, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2070 Oakley Ave  
 City Menlo Park State CA Zip Code 94025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 06 / 2023**  
**Transaction ID : SA11AI.7539**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Tompkins, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 81 State Street  
 City Brooklyn State NY Zip Code 11201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NYU Occupation (for Individual) Grad Student  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 14 / 2023**  
**Transaction ID : SA11AI.7595**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Tompkins, Graves, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 81 State Street  
 City Brooklyn State NY Zip Code 11201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) General Atlantic LLC Occupation (for Individual) Finance  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 14 / 2023**  
**Transaction ID : SA11AI.7594**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Walker, Kent, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1701 Bryant Street  
 City Palo Alto State CA Zip Code 94301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Google Occupation (for Individual) Chief Legal Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 09 / 2023  
**Transaction ID : SA11AI.7576**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. West, Nadja, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 451 Bayfront Place  
 City Naples State FL Zip Code 34102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 02 / 06 / 2023  
**Transaction ID : SA11AI.7465**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item Contribution

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	184750.00

**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 21 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. BANK OF AMERICA CORPORATION FEDERAL PAC**

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

Mailing Address 1800 K ST NW, STE FL 5  
DC1-842-05-05

City WASHINGTON	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C** C00364778

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
03	/	09	/	2023

**Transaction ID : SA11C.7482**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**B. CMS ENERGY CORPORATION EMPLOYEES FOR BETTER GOVERNMENT- FEDERAL**

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

Mailing Address ONE ENERGY PLAZA

City JACKSON	State MI	Zip Code 49201
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00075473

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	28	/	2023

**Transaction ID : SA11C.7564**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**C. GAP INC. POLITICAL ACTION COMMITTEE; THE**

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

Mailing Address 2 FOLSOM STREET  
13TH FLOOR

City SAN FRANCISCO	State CA	Zip Code 94105
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FEC ID number of contributing federal political committee. **C** C00257246

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
04	/	24	/	2023

**Transaction ID : SA11C.7555**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 48
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC

Mailing Address 9800 FREDERICKSBURG ROAD

City SAN ANTONIO	State TX	Zip Code 78288
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FEC ID number of contributing federal political committee. **C** C00164145

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

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		26		2023

**Transaction ID : SA11C.7561**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	20000.00

# 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

### A. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7446

Amount of Each Disbursement this Period

[REDACTED] 231.60

Memo Item

Full Name (Last, First, Middle Initial)

### B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7457

Amount of Each Disbursement this Period

[REDACTED] 192.80

Memo Item

Full Name (Last, First, Middle Initial)

### C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7458

Amount of Each Disbursement this Period

[REDACTED] 96.55

Memo Item

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

[REDACTED] 520.95

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

[REDACTED]

# 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

### A. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7460

Amount of Each Disbursement this Period

[REDACTED] 4.15

Memo Item

Full Name (Last, First, Middle Initial)

### B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	3			2	0	2	3		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7468

Amount of Each Disbursement this Period

[REDACTED] 202.73

Memo Item

Full Name (Last, First, Middle Initial)

### C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	7			2	0	2	3		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7471

Amount of Each Disbursement this Period

[REDACTED] 2.23

Memo Item

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

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

[REDACTED] 209.11

[REDACTED]



# 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

### A. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7472

Amount of Each Disbursement this Period

[REDACTED] 289.35

Memo Item

Full Name (Last, First, Middle Initial)

### B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7475

Amount of Each Disbursement this Period

[REDACTED] 192.80

Memo Item

Full Name (Last, First, Middle Initial)

### C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7484

Amount of Each Disbursement this Period

[REDACTED] 385.60

Memo Item

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

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

[REDACTED] 867.75

[REDACTED]

# 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

### A. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7493

Amount of Each Disbursement this Period

[REDACTED] 192.80

Memo Item

Full Name (Last, First, Middle Initial)

### B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7525

Amount of Each Disbursement this Period

[REDACTED] 385.60

Memo Item

Full Name (Last, First, Middle Initial)

### C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7526

Amount of Each Disbursement this Period

[REDACTED] 385.60

Memo Item

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

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

[REDACTED] 964.00

[REDACTED]

# 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)  
**WITH HONOR PAC**

**A. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 27 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7533

Amount of Each Disbursement this Period: 192.80

Memo Item

**B. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 29 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7532

Amount of Each Disbursement this Period: 192.80

Memo Item

**C. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 06 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7540

Amount of Each Disbursement this Period: 385.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 771.20

**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)  
**WITH HONOR PAC**

**A. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7543

Amount of Each Disbursement this Period: 192.80

Memo Item

**B. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7551

Amount of Each Disbursement this Period: 38.80

Memo Item

**C. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 18 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7552

Amount of Each Disbursement this Period: 0.76

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 232.36

**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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

### A. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7553

Amount of Each Disbursement this Period

[REDACTED] 4.15

Memo Item

Full Name (Last, First, Middle Initial)

### B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7554

Amount of Each Disbursement this Period

[REDACTED] 192.80

Memo Item

Full Name (Last, First, Middle Initial)

### C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.7562

Amount of Each Disbursement this Period

[REDACTED] 4.15

Memo Item

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

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

[REDACTED] 201.10

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**WITH HONOR PAC**

**A. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 26 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7563

Amount of Each Disbursement this Period: 192.80

Memo Item

**B. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 08 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7580

Amount of Each Disbursement this Period: 4.15

Memo Item

**C. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 12 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7581

Amount of Each Disbursement this Period: 385.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 582.55

**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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

### A. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	2	3

FEC Identification Number

**C**

**Transaction ID : SB21B.7586**

Amount of Each Disbursement this Period

38.80

Memo Item

Full Name (Last, First, Middle Initial)

### B. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	3

FEC Identification Number

**C**

**Transaction ID : SB21B.7599**

Amount of Each Disbursement this Period

4.15

Memo Item

Full Name (Last, First, Middle Initial)

### C. Anedot

Mailing Address 1340 Poydras St, Suite 1770

City  
New Orleans

State  
LA

Zip Code  
70112

Purpose of Disbursement  
Credit Card Processing

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	2	3

FEC Identification Number

**C**

**Transaction ID : SB21B.7600**

Amount of Each Disbursement this Period

0.69

Memo Item

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

43.64

**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)  
**WITH HONOR PAC**

**A. Anedot**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 Poydras St, Suite 1770

City New Orleans State LA Zip Code 70112

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 20 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7602

Amount of Each Disbursement this Period: 385.60

Memo Item

**B. Godaddy.com**

Full Name (Last, First, Middle Initial)

Mailing Address 14455 N Hayden Rd Suite 219

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement Website Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 13 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7492

Amount of Each Disbursement this Period: 84.68

Memo Item

**C. Koch & Hoos, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 N Washington St Ste 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Accounting/Compliance Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7451

Amount of Each Disbursement this Period: 541.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1011.28

**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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial) <b>A. Koch &amp; Hoos, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2023
Mailing Address 901 N Washington St Ste 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7476</b> Amount of Each Disbursement this Period [REDACTED] 968.70
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Accounting/Compliance Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Koch &amp; Hoos, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2023
Mailing Address 901 N Washington St Ste 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7531</b> Amount of Each Disbursement this Period [REDACTED] 468.50
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Accounting/Compliance Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Koch &amp; Hoos, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2023
Mailing Address 901 N Washington St Ste 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.7557</b> Amount of Each Disbursement this Period [REDACTED] 1785.70
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Accounting/Compliance Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 3222.90
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

# 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)  
**WITH HONOR PAC**

**A. Koch & Hoos, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 N Washington St  
Ste 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Accounting/Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 22 / 2023

FEC Identification Number: C

Transaction ID : **SB21B.7584**

Amount of Each Disbursement this Period: 803.20

Memo Item

**B. Koch & Hoos, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 N Washington St  
Ste 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Accounting/Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 22 / 2023

FEC Identification Number: C

Transaction ID : **SB21B.7601**

Amount of Each Disbursement this Period: 780.20

Memo Item

**C. Mailchimp**

Full Name (Last, First, Middle Initial)

Mailing Address 675 Ponce De Leon Ave NE  
Suite 5000

City Atlanta State GA Zip Code 30308

Purpose of Disbursement Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 10 / 2023

FEC Identification Number: C

Transaction ID : **SB21B.7427**

Amount of Each Disbursement this Period: 260.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1843.40

**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)  
**WITH HONOR PAC**

**A. Mailchimp**

Full Name (Last, First, Middle Initial)

Mailing Address 675 Ponce De Leon Ave NE  
Suite 5000

City Atlanta State GA Zip Code 30308

Purpose of Disbursement Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 10 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7473

Amount of Each Disbursement this Period: 260.00

Memo Item

**B. Mailchimp**

Full Name (Last, First, Middle Initial)

Mailing Address 675 Ponce De Leon Ave NE  
Suite 5000

City Atlanta State GA Zip Code 30308

Purpose of Disbursement Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 10 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7491

Amount of Each Disbursement this Period: 260.00

Memo Item

**C. Mailchimp**

Full Name (Last, First, Middle Initial)

Mailing Address 675 Ponce De Leon Ave NE  
Suite 5000

City Atlanta State GA Zip Code 30308

Purpose of Disbursement Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 10 / 2023

FEC Identification Number: C

Transaction ID : SB21B.7542

Amount of Each Disbursement this Period: 260.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 780.00

**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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

### A. Mailchimp

Mailing Address 675 Ponce De Leon Ave NE  
Suite 5000

City Atlanta State GA Zip Code 30308

Purpose of Disbursement  
Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 10 / 2023

FEC Identification Number

C

Transaction ID : SB21B.7579

Amount of Each Disbursement this Period

260.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Mailchimp

Mailing Address 675 Ponce De Leon Ave NE  
Suite 5000

City Atlanta State GA Zip Code 30308

Purpose of Disbursement  
Email Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2023

FEC Identification Number

C

Transaction ID : SB21B.7598

Amount of Each Disbursement this Period

260.00

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

520.00

11770.24

# 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 checked="" 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)  
**WITH HONOR PAC**

**A. CROSSPARTISAN PAC I**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1843

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
Transfer to Aff. Committee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 08 / 2023

FEC Identification Number: C00786186  
**Transaction ID : SB22.7485**  
Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. CROSSPARTISAN PAC I**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1843

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
Transfer to Aff. Committee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 23 / 2023

FEC Identification Number: C00786186  
**Transaction ID : SB22.7537**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. CROSSPARTISAN PAC I**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1843

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement  
Transfer to Aff. Committee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 30 / 2023

FEC Identification Number: C00786186  
**Transaction ID : SB22.7587**  
Amount of Each Disbursement this Period: 19363.58

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 39363.58

**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 type="checkbox"/> 21b	<input checked="" 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial) <b>A. CROSSPARTISAN PAC II</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2023
Mailing Address PO BOX 1843		FEC Identification Number C00786202 <b>Transaction ID : SB22.7486</b> Amount of Each Disbursement this Period 15000.00
City ALEXANDRIA	State VA	Zip Code 22313
Purpose of Disbursement Transfer to Aff. Committee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CROSSPARTISAN PAC II</b>		Date of Disbursement MM / DD / YYYY 03 / 23 / 2023
Mailing Address PO BOX 1843		FEC Identification Number C00786202 <b>Transaction ID : SB22.7538</b> Amount of Each Disbursement this Period 5000.00
City ALEXANDRIA	State VA	Zip Code 22313
Purpose of Disbursement Transfer to Aff. Committee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CROSSPARTISAN PAC II</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2023
Mailing Address PO BOX 1843		FEC Identification Number C00786202 <b>Transaction ID : SB22.7588</b> Amount of Each Disbursement this Period 23932.73
City ALEXANDRIA	State VA	Zip Code 22313
Purpose of Disbursement Transfer to Aff. Committee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	43932.73
<b>TOTAL</b> This Period (last page this line number only).....▶	83296.31

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial) <b>A. CHRIS DELUZIO FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2023
Mailing Address PO BOX 16210		FEC Identification Number C C00787648 <b>Transaction ID : SB23.7597</b>
City PITTSBURGH	State PA	Zip Code 15242
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>DELUZIO, CHRISTOPHER, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 17	

Full Name (Last, First, Middle Initial) <b>B. CHRISSY HOULAHAN FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address PO BOX 222		FEC Identification Number C C00637371 <b>Transaction ID : SB23.7514</b>
City DEVON	State PA	Zip Code 19333
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>HOULAHAN, CHRISSY, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 06	

Full Name (Last, First, Middle Initial) <b>C. COMMITTEE TO ELECT JARED GOLDEN</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address PO BOX 7108		FEC Identification Number C C00653816 <b>Transaction ID : SB23.7510</b>
City LEWISTON	State ME	Zip Code 04240
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>GOLDEN, JARED, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ME	District: 02	

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

10000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

### A. COMMITTEE TO ELECT JARED GOLDEN

Mailing Address PO BOX 7108

City  
LEWISTON

State  
ME

Zip Code  
04240

Purpose of Disbursement  
Contribution

Candidate Name

**GOLDEN, JARED, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	2	3

FEC Identification Number

**C** C00653816

**Transaction ID : SB23.7566**

Amount of Each Disbursement this Period

2	5	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

### B. DON BACON FOR CONGRESS

Mailing Address P.O. BOX 391368

City  
OMAHA

State  
NE

Zip Code  
68139

Purpose of Disbursement  
Contribution

Candidate Name

**BACON, DONALD, J., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: NE District: 02

Date of Disbursement

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

FEC Identification Number

**C** C00575167

**Transaction ID : SB23.7505**

Amount of Each Disbursement this Period

5	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

### C. DON DAVIS FOR NC

Mailing Address PO BOX 511

City  
SNOW HILL

State  
NC

Zip Code  
28580

Purpose of Disbursement  
Contribution

Candidate Name

**DAVIS, DON, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: NC District: 01

Date of Disbursement

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

FEC Identification Number

**C** C00795211

**Transaction ID : SB23.7502**

Amount of Each Disbursement this Period

2	5	0	0	0	0
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Memo Item

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

1	0	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

1	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)  
**A. IOWANS FOR ZACH NUNN**

Mailing Address PO BOX 11

City BONDURANT State IA Zip Code 50035

Purpose of Disbursement Contribution

Candidate Name NUNN, ZACH, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼

State: IA District: 03

Date of Disbursement: 03 / 21 / 2023

FEC Identification Number: C00784389  
Transaction ID : SB23.7511  
Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. IOWANS FOR ZACH NUNN**

Mailing Address PO BOX 11

City BONDURANT State IA Zip Code 50035

Purpose of Disbursement Contribution

Candidate Name NUNN, ZACH, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼

State: IA District: 03

Date of Disbursement: 05 / 04 / 2023

FEC Identification Number: C00784389  
Transaction ID : SB23.7575  
Amount of Each Disbursement this Period: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. JAKE ELLZEY FOR CONGRESS**

Mailing Address 1005 CONGRESS AVENUE SUITE 400

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement Contribution

Candidate Name ELLZEY, JOHN KEVIN, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼

State: TX District: 06

Date of Disbursement: 05 / 23 / 2023

FEC Identification Number: C00770438  
Transaction ID : SB23.7585  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial) <b>A. JASON CROW FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address 8547 E ARAPAHOE ROAD STE J-543		FEC Identification Number C00637363 <b>Transaction ID : SB23.7503</b>
City GREENWOOD VILLAGE	State CO	Zip Code 80112
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>CROW, JASON, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO	District: 06	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. JEFF JACKSON FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 03 / 23 / 2023
Mailing Address 301 HILLSBOROUGH ST STE 950		FEC Identification Number C00767400 <b>Transaction ID : SB23.7518</b>
City RALEIGH	State NC	Zip Code 27603
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>JACKSON, JEFF, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 14	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. JIMMY PANETTA FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address PO BOX 103		FEC Identification Number C00592154 <b>Transaction ID : SB23.7506</b>
City CARMEL VALLEY	State CA	Zip Code 93924
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>PANETTA, JIMMY, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 19	
<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8500.00
<b>TOTAL</b> 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

**A. JOHN JAMES FOR CONGRESS, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2023

Mailing Address P.O. BOX 628

City SAINT CLAIR SHORES State MI Zip Code 48080

FEC Identification Number

**C** C00803502

**Transaction ID : SB23.7524**

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement Contribution

Category/Type

Candidate Name  
**JAMES, JOHN, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: MI District: 10

Memo Item

Full Name (Last, First, Middle Initial)

**B. LALOTA FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2023

Mailing Address PO BOX 5744

City HAUPPAUGE State NY Zip Code 11788

FEC Identification Number

**C** C00806018

**Transaction ID : SB23.7504**

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement Contribution

Category/Type

Candidate Name  
**LALOTA, NICHOLAS JOSEPH, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: NY District: 01

Memo Item

Full Name (Last, First, Middle Initial)

**C. LALOTA FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2023

Mailing Address PO BOX 5744

City HAUPPAUGE State NY Zip Code 11788

FEC Identification Number

**C** C00806018

**Transaction ID : SB23.7534**

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement Contribution

Category/Type

Candidate Name  
**LALOTA, NICHOLAS JOSEPH, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: NY District: 01

Memo Item

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

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

7500.00

# 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**WITH HONOR PAC**

## A. MICHAEL WALTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1235 PROVIDENCE BLVD., STE R  
PMB 502

M M M	/	D D D	/	Y Y Y Y Y
03		21		2023

City DELTONA State FL Zip Code 32725

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00666396
---	-----------

Candidate Name  
**WALTZ, MICHAEL, , ,**

Category/  
Type

Transaction ID : **SB23.7507**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2024  Primary  General  Other (specify) ▼  
 State: FL District: 06

2500.00
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Memo Item

## B. MIKE GALLAGHER FOR WISCONSIN

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1027

M M M	/	D D D	/	Y Y Y Y Y
03		08		2023

City GREEN BAY State WI Zip Code 54305

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00610212
---	-----------

Candidate Name  
**GALLAGHER, MICHAEL JOHN, , ,**

Category/  
Type

Transaction ID : **SB23.7481**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2024  Primary  General  Other (specify) ▼  
 State: WI District: 08

5000.00
---------

Memo Item

## C. MIKIE SHERRILL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 43032

M M M	/	D D D	/	Y Y Y Y Y
03		28		2023

City MONTCLAIR State NJ Zip Code 07043

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00640003
---	-----------

Candidate Name  
**SHERRILL, MIKIE, , ,**

Category/  
Type

Transaction ID : **SB23.7529**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2024  Primary  General  Other (specify) ▼  
 State: NJ District: 11

5000.00
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Memo Item

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

12500.00
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**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**WITH HONOR PAC**

**A. MILLER-MEEKS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
MILLER-MEEKS FOR CONGRESS

Date of Disbursement: 03 / 08 / 2023

Mailing Address: PO BOX 33

City: OTTUMWA, State: IA, Zip Code: 52501

Purpose of Disbursement: Contribution

FEC Identification Number: C00558825  
Transaction ID: SB23.7480  
Amount of Each Disbursement this Period: 5000.00

Candidate Name: MILLER-MEEKS, MARIANNETTE JANE, , ,  
Office Sought:  House,  Senate,  President  
Disbursement For: 2024,  Primary,  General,  Other (specify) ▼  
State: IA, District: 01

Memo Item

**B. MOULTON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
MOULTON FOR CONGRESS

Date of Disbursement: 03 / 21 / 2023

Mailing Address: PO BOX 2013

City: SALEM, State: MA, Zip Code: 01970

Purpose of Disbursement: Contribution

FEC Identification Number: C00547240  
Transaction ID: SB23.7515  
Amount of Each Disbursement this Period: 2500.00

Candidate Name: MOULTON, SETH, , ,  
Office Sought:  House,  Senate,  President  
Disbursement For: 2024,  Primary,  General,  Other (specify) ▼  
State: MA, District: 06

Memo Item

**C. PAT RYAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
PAT RYAN FOR CONGRESS

Date of Disbursement: 03 / 21 / 2023

Mailing Address: PO BOX 2113

City: KINGSTON, State: NY, Zip Code: 12402

Purpose of Disbursement: Contribution

FEC Identification Number: C00815290  
Transaction ID: SB23.7516  
Amount of Each Disbursement this Period: 2500.00

Candidate Name: RYAN, PATRICK, , ,  
Office Sought:  House,  Senate,  President  
Disbursement For: 2024,  Primary,  General,  Other (specify) ▼  
State: NY, District: 18

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**WITH HONOR PAC**

## A. PAT RYAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2113

City  
KINGSTON

State  
NY

Zip Code  
12402

Purpose of Disbursement  
Contribution

Candidate Name

**RYAN, PATRICK, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	2	3

FEC Identification Number

**C** C00815290

**Transaction ID : SB23.7589**

Amount of Each Disbursement this Period

2500.00

Memo Item

## B. PETERS FOR MICHIGAN

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 32072

City  
DETROIT

State  
MI

Zip Code  
48244

Purpose of Disbursement  
Contribution

Candidate Name

**PETERS, GARY, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: MI District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	3

FEC Identification Number

**C** C00437889

**Transaction ID : SB23.7523**

Amount of Each Disbursement this Period

5000.00

Memo Item

## C. SALUD CARBAJAL FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1290

City  
SANTA BARBARA

State  
CA

Zip Code  
93102

Purpose of Disbursement  
Contribution

Candidate Name

**CARBAJAL, SALUD, O., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 24

Date of Disbursement

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

FEC Identification Number

**C** C00576041

**Transaction ID : SB23.7508**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

10000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**WITH HONOR PAC**

**A. TAKING THE HILL PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 499 S CAPITOL STREET, SW  
SUITE 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2023  Primary  General  Other (specify) Annual

State: District:

Date of Disbursement 05 / 02 / 2023

FEC Identification Number C00677591  
**Transaction ID : SB23.7567**  
Amount of Each Disbursement this Period 5000.00

Memo Item

**B. TONY GONZALES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 700442

City SAN ANTONIO State TX Zip Code 78270

Purpose of Disbursement Contribution

Candidate Name GONZALES, ERNEST ANTHONY TONY, , , II

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify)

State: TX District: 23

Date of Disbursement 03 / 08 / 2023

FEC Identification Number C00706614  
**Transaction ID : SB23.7479**  
Amount of Each Disbursement this Period 5000.00

Memo Item

**C. WOMACK FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 508

City ROGERS State AR Zip Code 72757

Purpose of Disbursement Contribution

Candidate Name WOMACK, STEPHEN, A., ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify)

State: AR District: 03

Date of Disbursement 05 / 04 / 2023

FEC Identification Number C00477745  
**Transaction ID : SB23.7570**  
Amount of Each Disbursement this Period 5000.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	93500.00

# 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 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)  
**WITH HONOR PAC**

Full Name (Last, First, Middle Initial)

### A. New Day Bill Conway

Mailing Address 333 N Canal Street  
#3604

City  
Chicago

State  
IL

Zip Code  
60606

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	2	3

FEC Identification Number

C [ ]

Transaction ID : SB29.7431

Amount of Each Disbursement this Period

[ ] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Wes Moore for Maryland

Mailing Address PO Box 50123

City  
Baltimore

State  
MD

Zip Code  
21211

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	3

FEC Identification Number

C [ ]

Transaction ID : SB29.7604

Amount of Each Disbursement this Period

[ ] 6000.00

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

[ ] 11000.00

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

[ ] 11000.00