

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

THE BIPARTISAN NETWORK 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="2025"/>		<input type="text" value="1562514.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1562514.37"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(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="1562514.37"/>	<input type="text" value="1562514.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="294810.91"/>	<input type="text" value="294810.91"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1267703.46"/>	<input type="text" value="1267703.46"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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 the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

THE BIPARTISAN NETWORK PAC

Report Covering the Period: From: 01 / 01 / 2025 To: 06 / 30 / 2025

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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)).....▶	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	0.00

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	61810.91	61810.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	61810.91	61810.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	75000.00	75000.00
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).....	158000.00	158000.00
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)) ..	294810.91	294810.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	294810.91	294810.91

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	61810.91	61810.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	61810.91	61810.91

**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)
THE BIPARTISAN NETWORK PAC

A. GROTE & ASSOCIATES

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 638

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement
PAC MANAGEMENT CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 02 / 24 / 2025

FEC Identification Number: C
Transaction ID : SB21B.4809
Amount of Each Disbursement this Period: 1562.50

Memo Item

B. INTUIT

Full Name (Last, First, Middle Initial)
Mailing Address 2632 MAINE WAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

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

State: District:

Date of Disbursement: 02 / 12 / 2025

FEC Identification Number: C
Transaction ID : SB21B.4764
Amount of Each Disbursement this Period: 104.94

Memo Item

C. INTUIT

Full Name (Last, First, Middle Initial)
Mailing Address 2632 MAINE WAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

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

State: District:

Date of Disbursement: 03 / 12 / 2025

FEC Identification Number: C
Transaction ID : SB21B.4794
Amount of Each Disbursement this Period: 104.94

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1772.38

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)

THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2632 MAINE WAY

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	4			2	0	2	5		

FEC Identification Number

C

Transaction ID : SB21B.4799

Amount of Each Disbursement this Period

104.94

Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2632 MAINE WAY

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4814

Amount of Each Disbursement this Period

104.94

Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT

Mailing Address 2632 MAINE WAY

City
MOUNTAIN VIEW

State
CA

Zip Code
94043

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.4817

Amount of Each Disbursement this Period

104.94

Memo Item

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

314.82

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
THE BIPARTISAN NETWORK PAC

A. LEX POLITICA, PLLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 02 / 2025

FEC Identification Number: C

Transaction ID : SB21B.4760

Amount of Each Disbursement this Period: 4139.00

Memo Item

B. LEX POLITICA, PLLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 02 / 2025

FEC Identification Number: C

Transaction ID : SB21B.4761

Amount of Each Disbursement this Period: 111.00

Memo Item

C. LEX POLITICA, PLLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2025

FEC Identification Number: C

Transaction ID : SB21B.4769

Amount of Each Disbursement this Period: 555.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4805.00

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)
THE BIPARTISAN NETWORK PAC

A. LEX POLITICA, PLLC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 06 / 2025

FEC Identification Number: C
Transaction ID : SB21B.4793
Amount of Each Disbursement this Period: 4080.00

Memo Item

B. LEX POLITICA, PLLC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 17 / 2025

FEC Identification Number: C
Transaction ID : SB21B.4795
Amount of Each Disbursement this Period: 9550.00

Memo Item

C. LEX POLITICA, PLLC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 341016

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 05 / 09 / 2025

FEC Identification Number: C
Transaction ID : SB21B.4812
Amount of Each Disbursement this Period: 2945.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 16575.00

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)

THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial)

A. LEX POLITICA, PLLC

Mailing Address PO BOX 341016

City
AUSTIN

State
TX

Zip Code
78734

Purpose of Disbursement
LEGAL CONSULTING

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	6			2	7			2	0	2	5		

FEC Identification Number

C _____
Transaction ID : SB21B.4826

Amount of Each Disbursement this Period

_____ 1860.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RIGHTSIDE COMPLIANCE LLC

Mailing Address PO BOX 341027

City
AUSTIN

State
TX

Zip Code
78734

Purpose of Disbursement
COMPLIANCE CONSULTING

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	1			1	0			2	0	2	5		

FEC Identification Number

C _____
Transaction ID : SB21B.4755

Amount of Each Disbursement this Period

_____ 954.75

Memo Item

Full Name (Last, First, Middle Initial)

C. RIGHTSIDE COMPLIANCE LLC

Mailing Address PO BOX 341027

City
AUSTIN

State
TX

Zip Code
78734

Purpose of Disbursement
COMPLIANCE CONSULTING

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	5		

FEC Identification Number

C _____
Transaction ID : SB21B.4763

Amount of Each Disbursement this Period

_____ 1791.55

Memo Item

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

_____ 4606.30

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)
THE BIPARTISAN NETWORK PAC

A. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 05 / 2025

FEC Identification Number: C

Transaction ID : SB21B.4792

Amount of Each Disbursement this Period: 1210.73

Memo Item

B. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2025

FEC Identification Number: C

Transaction ID : SB21B.4798

Amount of Each Disbursement this Period: 828.30

Memo Item

C. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 09 / 2025

FEC Identification Number: C

Transaction ID : SB21B.4813

Amount of Each Disbursement this Period: 880.73

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2919.76

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
THE BIPARTISAN NETWORK PAC

A. RIGHTSIDE COMPLIANCE LLC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 341027

City AUSTIN State TX Zip Code 78734

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 06 / 2025

FEC Identification Number: C

Transaction ID : SB21B.4815

Amount of Each Disbursement this Period: 495.00

Memo Item

B. WILCOX, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5018 4TH STREET NORTH

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement OPERATIONS MGMT CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2025

FEC Identification Number: C

Transaction ID : SB21B.4797

Amount of Each Disbursement this Period: 15000.00

Memo Item

C. WILCOX, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5018 4TH STREET NORTH

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement OPERATIONS MGMT CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2025

FEC Identification Number: C

Transaction ID : SB21B.4827

Amount of Each Disbursement this Period: 15000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	30495.00
TOTAL This Period (last page this line number only).....▶	61488.26

**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)

THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial)

A. ONE GIANT LEAP PAC

Mailing Address PO BOX 2153

City
PURCELLVILLE

State
VA

Zip Code
20134

Purpose of Disbursement
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	Y	Y
0	4		1	6		2	0	2	5		

FEC Identification Number

C C00854059

Transaction ID : SB23.4802

Amount of Each Disbursement this Period

25000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PROTECT FREEDOM POLITICAL ACTION COMMITTEE

Mailing Address 196 ALPS RD
STE 2-244

City
ATHENS

State
GA

Zip Code
30606

Purpose of Disbursement
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	Y	Y
0	5		0	5		2	0	2	5		

FEC Identification Number

C C00657866

Transaction ID : SB23.4811

Amount of Each Disbursement this Period

50000.00

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	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

75000.00

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

75000.00

**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)
THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial) A. 46 FORWARD INC		Date of Disbursement MM / DD / YYYY 02 / 20 / 2025
Mailing Address 502 MONROE STREET		FEC Identification Number C Transaction ID : SB29.4767 Amount of Each Disbursement this Period 25000.00
City NEWPORT	State KY	
Zip Code 41071		Memo Item <input type="checkbox"/>
Purpose of Disbursement NON FEDERAL DISB - CONTRIBUTION		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BIPARTISAN NETWORK SOUTH DAKOTA PAC		Date of Disbursement MM / DD / YYYY 06 / 16 / 2025
Mailing Address 444 N CAPITOL ST NW STE 200		FEC Identification Number C Transaction ID : SB29.4818 Amount of Each Disbursement this Period 10000.00
City WASHINGTON	State DC	
Zip Code 20001		Memo Item <input type="checkbox"/>
Purpose of Disbursement NON FEDERAL DISB - CONTRIBUTION		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CITIZENS FOR JOHN M CABELLO		Date of Disbursement MM / DD / YYYY 02 / 26 / 2025
Mailing Address 324 N PIER DR		FEC Identification Number C Transaction ID : SB29.4776 Amount of Each Disbursement this Period 500.00
City MACHESNEY PARK	State IL	
Zip Code 61115		Memo Item <input type="checkbox"/>
Purpose of Disbursement NON FEDERAL DISB - CONTRIBUTION		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	35500.00
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 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)

THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR SETH LEWIS

Mailing Address 29 W 571 SUNNYDALE CT

City
BARTLETT

State
IL

Zip Code
60103

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	26	/	2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4772

Amount of Each Disbursement this Period

[REDACTED]	500.00
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO RE-ELECT ANDREW FARMER

Mailing Address 103 COMMERCE STREET

City
SEVIERVILLE

State
TN

Zip Code
37862

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	13	/	2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4754

Amount of Each Disbursement this Period

[REDACTED]	1000.00
------------	---------

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAVE VELLA

Mailing Address 3235 WINDSON CT

City
ROCKFORD

State
IL

Zip Code
61114

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	26	/	2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4780

Amount of Each Disbursement this Period

[REDACTED]	500.00
------------	--------

Memo Item

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

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

[REDACTED]	2000.00
------------	---------

[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 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)

THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ELGIE SIMS

Mailing Address 8142A PRARIE PARK PLACE

City
CHICAGO

State
IL

Zip Code
60619

Purpose of Disbursement
NON FEDERAL DISB - 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	2		2	6		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4774

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JUSTIN SLAUGHTER

Mailing Address PO BOX 201874

City
CHICAGO

State
IL

Zip Code
60620

Purpose of Disbursement
NON FEDERAL DISB - 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	2		2	6		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4778

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF KAM BUCKNER

Mailing Address PO BOX 53528

City
CHICAGO

State
IL

Zip Code
60653

Purpose of Disbursement
NON FEDERAL DISB - 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	2		2	6		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4782

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

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

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

[REDACTED] 1500.00

[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 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)

THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF LISA J DAVIS

Mailing Address 8031 S KEELER AVENUE

City
CHICAGO

State
IL

Zip Code
60652

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

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 M	/	D D D	/	Y Y Y Y Y
02	/	26	/	2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4784

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SHERYL DELOZIER

Mailing Address PO BOX 66

City
NEW CUMBERLAND

State
PA

Zip Code
17070

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

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 M	/	D D D	/	Y Y Y Y Y
06	/	12	/	2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4816

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MAVERICKS INC.

Mailing Address 138 CONANT STREET
SUITE 401

City
BEVERLY

State
MA

Zip Code
01915

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

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 M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4786

Amount of Each Disbursement this Period

[REDACTED] 25000.00

Memo Item

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

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

[REDACTED] 30500.00

[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 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)

THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial)

A. ND SENATE REPUBLICAN CAUCUS

Mailing Address 2401 62ND AVE SE

City
MCKENZIE

State
ND

Zip Code
58572

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

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	2		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4751

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PETERS FOR ILLINOIS

Mailing Address PO BOX 15118

City
CHICAGO

State
IL

Zip Code
60615

Purpose of Disbursement

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		2	6		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4770

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SHAPIRO FOR PENNSYLVANIA

Mailing Address 611 PENNSYLVANIA AVE SE
STE 143

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

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	6		1	8		2	0	2	5

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4821

Amount of Each Disbursement this Period

[REDACTED] 50000.00

Memo Item

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

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

[REDACTED] 51500.00

[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 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)

THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial)

A. SPANBERGER FOR GOVERNOR

Mailing Address PO BOX 3121

City
GLENN ALLEN

State
VA

Zip Code
23058

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

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 M	/	D D D	/	Y Y Y Y Y
04		22		2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4804

Amount of Each Disbursement this Period

[REDACTED] 25000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VA FUTURE GENERATIONS PAC

Mailing Address PO BOX 3604

City
RICHMOND

State
VA

Zip Code
23235

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

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 M	/	D D D	/	Y Y Y Y Y
06		26		2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4824

Amount of Each Disbursement this Period

[REDACTED] 10000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VOTE BOLICK

Mailing Address 610 E BELL RD
STE 2-142

City
PHOENIX

State
AZ

Zip Code
85022

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

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 M	/	D D D	/	Y Y Y Y Y
01		09		2025

FEC Identification Number

C [REDACTED]

Transaction ID : SB29.4758

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

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

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

[REDACTED] 36000.00

[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 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)

THE BIPARTISAN NETWORK PAC

Full Name (Last, First, Middle Initial)

A. WALT BLACKMAN FOR STATE REPRESENTATIVE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		09		2025

Mailing Address 1831 PRAIRIE RD # W W

City SNOWFLAKE	State AZ	Zip Code 85937
-------------------	-------------	-------------------

FEC Identification Number

C []

Transaction ID : SB29.4757

Amount of Each Disbursement this Period

[] 1000.00

Purpose of Disbursement
NON FEDERAL DISB - CONTRIBUTION

[]

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[]		[]		[]

Mailing Address

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Purpose of Disbursement

[]

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
[]		[]		[]

Mailing Address

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

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Purpose of Disbursement

[]

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Memo Item

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

[] 1000.00

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

[] 158000.00