

**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

JONI'S ROAST AND RIDE

ADDRESS (number and street)

PO BOX 93441

Check if different
than previously
reported. (ACC)

DES MOINES

IA

50393

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00614198

3. IS THIS
REPORTNEW
(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) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

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

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

Election on

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

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

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

Election on

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

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2023

through

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

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

HOBBS, CABELL, , ,

Type or Print Name of Treasurer

Signature of Treasurer

HOBBS, CABELL, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 14 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.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

JONI'S ROAST AND RIDE

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
01 01 2023

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2023		106161.90
(b) Cash on Hand at Beginning of Reporting Period.....	106161.90	
(c) Total Receipts (from Line 19)	225000.00	225000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	331161.90	331161.90
7. Total Disbursements (from Line 31).....	183953.13	183953.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	147208.77	147208.77
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:Federal Election Commission
999 E Street, NW
Washington, DC 20463Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

JONI'S ROAST AND RIDE

Report Covering the Period:

From:

M M / D D / Y Y Y Y
01 01 2023

To:

M M / D D / Y Y Y Y
03 31 2023**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).....

225000.00

225000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

225000.00

225000.00

(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)

225000.00

225000.00

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))

225000.00

225000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

225000.00

225000.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	178953.13	178953.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	178953.13	178953.13
22. Transfers to Affiliated/Other Party Committees.....	5000.00	5000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	183953.13	183953.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	183953.13	183953.13

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)	225000.00	225000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	225000.00	225000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	178953.13	178953.13
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	178953.13	178953.13

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 16
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

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

A. FRANCE, BRIAN, Z., MR.,

Mailing Address P.O. BOX 2875

City

DAYTONA BEACH

State

FL

Zip Code

32120-2875

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

NASCAR

Occupation (for Individual)

CHAIRMAN & C.E.O.

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 03 / 2023

Transaction ID : SA11A.669016

Amount of Each Receipt this Period

15000.00

☐ Memo Item
CONTRIBUTION

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

B. GLEESON, JOHN, W., MR.,

Mailing Address 58 RED BRIDGE DRIVE

City

SIOUX CITY

State

IA

Zip Code

51104-1061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

KLINGER COMPANIES, INC.

Occupation (for Individual)

PRESIDENT

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 27 / 2023

Transaction ID : SA11A.669710

Amount of Each Receipt this Period

12500.00

☐ Memo Item
CONTRIBUTION

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

C. RAY-GLEESON, KAREN, S., MRS.,

Mailing Address 58 RED BRIDGE DRIVE

City

SIOUX CITY

State

IA

Zip Code

51104-1061

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 ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 27 / 2023

Transaction ID : SA11A.669709

Amount of Each Receipt this Period

12500.00

☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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

40000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 16

(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

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

A. ABEL, ANDREA, , MS.,

Mailing Address 3407 LINCOLN PL DR.

City
DES MOINESState
IAZip Code
50312-3004FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
HOMEMAKEROccupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 07 / 2023

Transaction ID : SA11A.670054

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION

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

B. BAKER, BERNARD, J., MR., III

Mailing Address 1525 TULIP TREE LANE

City
WEST DES MOINESState
IAZip Code
50266-6676FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
BAKER GROUPOccupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 22 / 2023

Transaction ID : SA11A.670857

Amount of Each Receipt this Period

15000.00

☐ Memo Item
CONTRIBUTION

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

C. MCINERNEY, THOMAS, E., MR.,

Mailing Address 2 MANITOU CT

City
WESTPORTState
CTZip Code
06880-6006FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
BLUFF POINT ASSOC. CORPORATIONOccupation (for Individual)
VENTURE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 22 / 2023

Transaction ID : SA11A.670858

Amount of Each Receipt this Period

50000.00

☐ Memo Item
CONTRIBUTION**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 16
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

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

A. NICOLLS, BOB, , MR.,

Mailing Address 2195 N HWY 83

City
FRANKTOWNState
COZip Code
80116-9664FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MONARCHOccupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
03 / 17 / 2023

Transaction ID : SA11A.672217

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

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

B. GOLDMAN, MARC, STANLEY, ,

Mailing Address 1500 SOUTH OCEAN BOULEVARD

City
BOCA RATONState
FLZip Code
33432-8529FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
03 / 23 / 2023

Transaction ID : SA11A.672664

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

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

C. GRAY, C., BOYDEN, ,Mailing Address 1627 1ST STREET NW
SUITE 950City
WASHINGTONState
DCZip Code
20001-1101FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYEDOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
03 / 29 / 2023

Transaction ID : SA11A.672683

Amount of Each Receipt this Period

25000.00

☐ Memo Item
CONTRIBUTION

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

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

60000.00

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

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

FOR LINE NUMBER: PAGE 9 OF 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

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

A. SCHLOEMER, JAMES, H., MR.,

Mailing Address W134 N8675 EXECUTIVE PKWY.

City
MENOMONEE FALLS

State
WI

Zip Code
53051-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CONTINENTAL PROPERTIES COMPANY, INC

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : SA11A.673108

Amount of Each Receipt this Period

10000.00

☐ Memo Item
CONTRIBUTION

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

10000.00

225000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 16

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

Full Name (Last, First, Middle Initial)

A. BB&T VISA

Mailing Address PO BOX 580340

City
CHARLOTTEState
NCZip Code
28258Purpose of Disbursement
CREDIT CARD PAYMENT-SEE DETAIL

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	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B001

Amount of Each Disbursement this Period

85.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SUBSCRIPTION

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	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B001CC

Amount of Each Disbursement this Period

85.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT INC

Mailing Address 1340 POYDRAS STREET STE 1770

City
NEW ORLENSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

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	/	Y	Y	Y	Y	Y	Y
0	2			0	9			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B002

Amount of Each Disbursement this Period

2000.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2085.30

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 16

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

Full Name (Last, First, Middle Initial)

A. BB&T VISA

Mailing Address PO BOX 580340

City
CHARLOTTEState
NCZip Code
28258Purpose of Disbursement
CREDIT CARD PAYMENT-SEE DETAIL

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	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B003

Amount of Each Disbursement this Period

85.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SUBSCRIPTION

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	/	Y	Y	Y	Y	Y	Y
0	2			1	7			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B003CC

Amount of Each Disbursement this Period

85.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. RIGHTSIDE COMPLIANCE

Mailing Address PO BOX 341027

City
AUSTINState
TXZip Code
78734Purpose 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	/	Y	Y	Y	Y	Y	Y
0	2			2	2			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B005

Amount of Each Disbursement this Period

7663.75

☐ Memo Item

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

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

7748.75

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

Full Name (Last, First, Middle Initial)

A. SOCKO STRATEGIES LLC

Mailing Address 1101 30TH ST NW STE 125

City
WASHINGTONState
DCZip Code
20007Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B006

Amount of Each Disbursement this Period

17271.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 2311 WILSON BLVD STE 200

City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B007

Amount of Each Disbursement this Period

7971.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VENABLE LLP

Mailing Address PO BOX 62727

City
BALTIMOREState
MDZip Code
21264Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B008

Amount of Each Disbursement this Period

5167.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30409.58

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

Full Name (Last, First, Middle Initial)

A. JOBS OPPORTUNITY & NEW IDEAS PAC

Mailing Address PO BOX 93441

City
DES MOINESState
IAZip Code
50393Purpose of Disbursement
EVENT MANAGEMENT SERVICE REIMBURSEMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C C00566851

Transaction ID : SB21B004

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOBS OPPORTUNITY & NEW IDEAS PAC

Mailing Address PO BOX 93441

City
DES MOINESState
IAZip Code
50393Purpose of Disbursement
EVENT MANAGEMENT SERVICE REIMBURSEMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C C00566851

Transaction ID : SB21B009

Amount of Each Disbursement this Period

105123.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B010

Amount of Each Disbursement this Period

85.00

☐ Memo Item

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

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

120208.70

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

Full Name (Last, First, Middle Initial)

A. BB&T VISA

Mailing Address PO BOX 580340

City
CHARLOTTEState
NCZip Code
28258Purpose of Disbursement
CREDIT CARD PAYMENT-SEE DETAIL

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	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B011

Amount of Each Disbursement this Period

107.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2700 COAST AVE

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SUBSCRIPTION

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	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B011CC

Amount of Each Disbursement this Period

85.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT INC

Mailing Address 1340 POYDRAS STREET STE 1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING FEE

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	/	Y	Y	Y	Y	Y	Y
0	3			2	1			2	0	2	3	

FEC Identification Number

C

Transaction ID : SB21B014

Amount of Each Disbursement this Period

1000.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1108.00

☒	21b	☐	22	☐	23	☐	26	☐	27
☐	28a	☐	28b	☐	28c	☐	29	☐	30b

JONI'S ROAST AND RIDE

1492.50

Memo Item

Three 16-bit registers are shown, each with a 4-bit address field at the top and a 12-bit data field below. The first register has address 'M M' and value '03'. The second register has address 'D D' and value '21'. The third register has address 'Y Y Y Y' and value '2023'.

15500.00

Memo Item

400.30

Memo Item

17392.80

178953.13

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

JONI'S ROAST AND RIDE

Full Name (Last, First, Middle Initial)

A. JOBS OPPORTUNITY & NEW IDEAS PAC

Date of Disbursement

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

Mailing Address PO BOX 93441

City
DES MOINESState
IAZip Code
50393Purpose of Disbursement
DISTRIBUTION OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C C00566851

Transaction ID : SB22001

Amount of Each Disbursement this Period

2102.76

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NRSC

Date of Disbursement

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

Mailing Address 425 2ND STREET NE

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
DISTRIBUTION OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C C00027466

Transaction ID : SB22002

Amount of Each Disbursement this Period

1097.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REPUBLICAN PARTY OF IOWA

Date of Disbursement

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

Mailing Address 621 E 9TH ST

City
DES MOINESState
IAZip Code
60309Purpose of Disbursement
DISTRIBUTION OF NET JOINT FUNDRAISING PROCEEDS

Candidate Name

Category/
TypeOffice Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

FEC Identification Number

C C00014498

Transaction ID : SB22003

Amount of Each Disbursement this Period

1799.26

☐ Memo Item

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

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

5000.00

5000.00