PAGE 1 / 12

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3X | For Other Than | An Authorized Com | ımittee | Offic | ce Use Only |
|--|--|----------------------------|--|---|--|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT | Example: over the li | If typing, type nes. | 12FE4M5 | |
| COUNTRY FIRST | | | | 1 1 1 1 1 | |
| | | | | | |
| ADDRESS (number and street | PO BOX 2385 | | | | |
| Check if different than previously reported. (ACC) | OTTAWA | | | IL 6 | 1350 |
| 2. FEC IDENTIFICATION | I NUMBER ▼ | CITY A | 5 | STATE A | ZIP CODE ▲ |
| C C00771113 | | 3. IS THIS REPORT | NEW (N) OR | AMEND (A) | ED |
| 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Repo July 15 Quarterly Repo October 15 Quarterly Repo January 31 Year-End Repo July 31 Mid-Ye Report (Non-ele Year Only) (MY Termination Re (TER) | rt (Q2) rt (Q3) rt (YE) ar ection) (C) 12-Day PRE-E Report (d) 30-Day POST- Report | ection for the: Conve | May 20 (M5) Jun 20 (M6) Jul 20 (M7) y (12P) ntion (12C) M / D D / al (30G) | Aug 20 (N Sep 20 (N Oct 20 (M General (12G) Special (12S) | M9) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) |
| 5. Covering Period | 03 01 | | ough 03 | 31 | 2024 |
| I certify that I have examine Type or Print Name of Trea | KII GORE PALII | | and belief it is true | e, correct and con | nplete. |
| Signature of Treasurer | KILGORE, PAUL, , , | | D | ate 03 | 31 2024 |
| NOTE: Submission of false, e | rroneous, or incomplete | information may subject th | ne person signing th | is Report to the pe | nalties of 52 U.S.C. § 30109. |
| Office Use Only | | | | F | EC FORM 3X Rev. 05/2016 |

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name **COUNTRY FIRST** 2024 03 31 2024 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1715990.09 January 1, 2024 (b) Cash on Hand at 1613628.78 Beginning of Reporting Period..... 3167.42 9898.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1725888.09 1616796.20 6(a) and 6(c) for Column B)..... 117155.66 8063.77 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 1608732.43 1608732.43 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

COUNTRY FIRST

| Report Covering the Period: From: | 01 2024 | To: 03 / 31 / 2024 | | |
|---|-------------------------------|--------------------------------|--|--|
| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | |
| . Contributions (other than loans) From: | Total Tills Fellou | Calelidai Teal-to-Date | | |
| (a) Individuals/Persons Other | | | | |
| Than Political Committees | | | | |
| (i) Itemized (use Schedule A) | 100.00 | 100.00 | | |
| () (, | | | | |
| (ii) Unitemized | 175.00 | 623.50 | | |
| (iii) TOTAL (add | | | | |
| Lines 11(a)(i) and (ii)▶ | 275.00 | 723.50 | | |
| _ | | | | |
| (b) Political Party Committees | 0.00 | 0.00 | | |
| (c) Other Political Committees | 0.00 | 2.22 | | |
| (such as PACs) | 0.00 | 0.00 | | |
| (d) Total Contributions (add Lines | | | | |
| 11(a)(iii), (b), and (c)) (Carry | 075.00 | 722.50 | | |
| Totals to Line 33, page 5)▶ | 275.00 | 723.50 | | |
| 2. Transfers From Affiliated/Other | 0.00 | 0.00 | | |
| Party Committees | 0.00 | 0.00 | | |
| | 0.00 | 0.00 | | |
| B. All Loans Received | 0.00 | 0.00 | | |
| | | 0.00 | | |
| Loan Repayments Received | 0.00 | 0.00 | | |
| 5. Offsets To Operating Expenditures | | | | |
| (Refunds, Rebates, etc.) | 0.00 | 0.00 | | |
| (Carry Totals to Line 37, page 5) | 0.00 | 0.00 | | |
| 6. Refunds of Contributions Made | | | | |
| to Federal Candidates and Other | 0.00 | 0.00 | | |
| Political Committees | 0.00 | 0.00 | | |
| (Dividends, Interest, etc.) | 2902.42 | 9174.50 | | |
| B. Transfers from Non-Federal and Levin Funds | 2892.42 | 3174.30 | | |
| (a) Non-Federal Account | | | | |
| (from Schedule H3) | 0.00 | 0.00 | | |
| (IIOIII Golloddio 110) | 4 4 | 4 4 | | |
| (la) Lavina Francia (franca Cabadiala 115) | 0.00 | 0.00 | | |
| (b) Levin Funds (from Schedule H5) | 4 4 | 45 45 | | |
| (c) Total Transfers (add 18(a) and 18(b)) | 0.00 | 0.00 | | |
| (c) Total Transfers (add To(a) and To(b)) | 0.00 | 0.00 | | |
| | | | | |
| Total Passints (add Lines 11/d) | | | | |
| Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 3167.42 | 9898.00 | | |
| 12, 10, 17, 10, 17, and 10(0)) | 3107.42 | 3030.00 | | |
| D. Total Federal Receipts | | | | |
| (subtract Line 18(c) from Line 19) | 3167.42 | 9898.00 | | |
| | 4 4 | 4 4 | | |

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 | | |
|---|-------------------------------|-----------------------------------|--|--|
| . Operating Expenditures: — (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | 100.10 20.0 | | |
| (i) Federal Share | 0.00 | 0.00 | | |
| (ii) Non-Federal Share | 0.00 | 0.00 | | |
| (b) Other Federal Operating | | | | |
| Expenditures | - 1436.23 | 30655.66 | | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶ | - 1436.23 | 30655.66 | | |
| Transfers to Affiliated/Other Party | 4 4 4 | | | |
| Contributions to | 0.00 | 75000.00 | | |
| Federal Candidates/Committees and Other Political Committees | 4500.00 | 6500.00 | | |
| Independent Expenditures (use Schedule E) | 0.00 | 0.00 | | |
| Coordinated Party Expenditures (52 U.S.C. § 30116(d)) | 0.00 | 0.00 | | |
| (use Schedule F) | 0.00 | 0.00 | | |
| Loan Repayments Made | 0.00 | 0.00 | | |
| Loans Made | 0.00 | 0.00 | | |
| Refunds of Contributions To: (a) Individuals/Persons Other | 4 4 | 4 4 4 4 | | |
| 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 | | |
| Other Disbursements (Including | | | | |
| Non-Federal Donations) | 5000.00 | 5000.00 | | |
| 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 | 0.00 | 0.00 | | |
| Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 | | |
| Total Disbursements (add Lines 21(c), 22, | | | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 8063.77 | 117155.66 | | |
| Total Federal Disbursements | | | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) | 9062.77 | | | |
| | 8063.77 | 117155.66 | | |

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 275.00 723.50 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 723.50 275.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures - 1436.23 30655.66 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 0.00 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures -1436.2330655.66 (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 (check only one) X 11a 11b 11c

12 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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) COUNTRY FIRST Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ROSE, BILL, , , Date of Receipt Mailing Address 1990 NEWELL ROAD 2024 28 03 City Zip Code State Transaction ID: SA11A.117008 **PALO ALTO** CA 94303-3421 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NONE **RETIRED** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... 100.00 TOTAL This Period (last page this line number only).....

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 7 OF 12 (check only one) | | | |
|--------------------------|--|----------------------------|--|---|--|--|--|
| ITEMIZED RECEIPTS | | | for each category of the Detailed Summary Page | 11a 11b 11c 12 13 14 15 16 X 17 | | | |
| Ar or | y information copied from such Reports and S for commercial purposes, other than using the | tatements ma name and a | ay not be sold or used by any p ddress of any political committed | erson for the purpose of soliciting contributions | | | |
| | NAME OF COMMITTEE (In Full) COUNTRY FIRST | | | | | | |
| Α. | Full Name of Individual (Last, First, Middle Init FIRST STATE BANK | ial) or Full O | rganization Name | Date of Receipt | | | |
| | Mailing Address 1212 LA SALLE STREET | | | 03 29 7 2024 | | | |
| | OTTAWA | State IL | Zip Code 61350-2023 | Transaction ID : SA17.29905 Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | | | 2892.42 | | | |
| | Name of Employer (for Individual) | Occ | upation (for Individual) | Memo Item | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | PAC BANK INTEREST | | | |
| | Primary General Other (specify) ▼ | 33.53 | 9174.50 | | | | |
| В. | Full Name of Individual (Last, First, Middle Init | ial) or Full O | rganization Name | Date of Receipt | | | |
| | Mailing Address | | | M = M / D = D / Y = Y = Y | | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | С | | Allount of Each Fleecipt this Feriod | | | |
| | Name of Employer (for Individual) | Occ | upation (for Individual) | Memo Item | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | | |
| | Primary General Other (specify) ▼ | | A. A. A. | | | | |
| С . | Full Name of Individual (Last, First, Middle Init | ial) or Full O | rganization Name | Date of Receipt | | | |
| • | Mailing Address | | | M = M / D = D / Y = Y = Y | | | |
| | City | State | Zip Code | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | С | | Through of Each record the Forest | | | |
| | Name of Employer (for Individual) | Occi | upation (for Individual) | Memo Item | | | |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ | | | | |
| H | UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of | | | 2892.42 2892.42 | | | |

| SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | | FOR LINE I (check only | • | | |
|--|---|---------------------------|---------------------------|---------------------|--|--|
| | Detailed Summary | | 28a | 28b 28c | | |
| Any information copied from such Reports and Stater or for commercial purposes, other than using the nan | ments may not be sol | d or used | by any perso | on for the purpose | e of soliciting contributions | |
| or for commercial purposes, other than using the han NAME OF COMMITTEE (In Full) | no and address of an | y ponucal | COMMINUEE IO | SOMER CONTINUE | nom such committee. | |
| COUNTRY FIRST | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| A. RAPIDS, DAVID, , , | | | | Date of Disbur | sement | |
| Mailing Address 2205 SKYLARK DR | 03 | 01 / 2024 | | | | |
| City WESTMINSTER | | FEC Identification Number | | | | |
| Purpose of Disbursement | | Tr | | C | | |
| VOID OF PREVIOUS-DUPLICATE PAYMENT Candidate Name | | — L | 2otoss=:/ | | on ID : SB21B.I2988 | |
| | | ' | Category/ Type | AMOUNT OF EAC | ch Disbursement this Period | |
| Office Sought: House Disburser | | | | | - 750.00 | |
| Senate President | Primary Gel Other (specify) ▼ | neral | | Memo Iten | 1 | |
| State: District: | | | | — | | |
| Full Name (Last, First, Middle Initial) B. DIDENOUD CDEO | | | | Date of Disbur | sement | |
| RIDENOUR, GREG, , , | | | | M M / D D / Y Y Y Y | | |
| Mailing Address 1743 WATERS EDGE DR. | | | | 03 | 29 2024 | |
| City MINOOKA | State Zip Cod IL 60447 | | | FEC Identificat | ion Number | |
| Purpose of Disbursement | 00447 | | | С | | |
| PAC MILEAGE | | | | | on ID : SB21B.I29901 | |
| Candidate Name Category/ Type | | | | | ch Disbursement this Period | |
| Office Sought: House Disburser | ment For: | 1 | .,,,,, | | 254.06 | |
| Senate | , | neral | | | 7 1 4 1 | |
| State: President District: | Other (specify) | | | Memo Iten | n | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| CMDI | | | | Date of Disbur | | |
| Mailing Address 1593 SPRING HILL ROAD SUITE 400 | | | | 03 | 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| | State Zip Cod | | | FEC Identificat | ion Number | |
| VIENNA Purpose of Dichursement | VA 22182 | | | | | |
| Purpose of Disbursement PAC SOFTWARE | | | | C | ID - ODGED ISSEE | |
| Candidate Name | | | Category/ Type | | on ID : SB21B.I2989 ch Disbursement this Period | |
| Office Sought: House Disburser | ment For: | | .,,,, | | 750.00 | |
| Senate | , | neral | | | , , , , , | |
| President State: District: | Other (specify) ▼ | | | Memo Item | า | |
| State. District. | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | | | 254.06 | |
| | | | | | 7 1 4 | |
| TOTAL This Period (last page this line number only) |) | | | | | |

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| SCHEDULE B (FEC Form 3X) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 9 | | |
|---|---|---|--|--|
| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check only 21b 28a | one) 22 23 26 27 28b 28c 29 30b | |
| Any information copied from such Reports and Statem | | | | |
| or for commercial purposes, other than using the name | e and address of any politica | committee to | solicit contributions from such committee. | |
| NAME OF COMMITTEE (In Full) | | | | |
| / COUNTRY FIRST | | | | |
| Full Name (Last, First, Middle Initial) | | | Data of Dishurasment | |
| ^{A.} PINK CILANTRO LLC | | | Date of Disbursement | |
| Mailing Address 11333 CHIMNEY ROCK RD. | | | 03 01 2024 | |
| , | State Zip Code | | FEC Identification Number | |
| | TX 77035 | | | |
| Purpose of Disbursement | | | | |
| VOID OF PREVIOUS-DUPLICATE PAYMENT Candidate Name | | | Transaction ID : SB21B.I29888 | |
| Candidate Name | | Category/ | Amount of Each Disbursement this Period | |
| Office Sought: House Disbursem | nent For: | Туре | - 3475.00 | |
| | Primary General | | | |
| President | Other (specify) ▼ | | Memo Item | |
| State: District: | | | | |
| Full Name (Last, First, Middle Initial) | _ | | Date of Disbursement | |
| PROFESSIONAL DATA SERVICE | S | | | |
| Mailing Address 824 S MILLEDGE AVE SUITE 101 | | | 03 12 2024 | |
| City | State Zip Code | | FEC Identification Number | |
| 71112110 | GA 30605-1332 | | | |
| Purpose of Disbursement | | | | |
| PAC COMPLIANCE SERVICES Candidate Name | | Transaction ID : SB21B.I29890 Amount of Each Disbursement this Period | | |
| Candidate Name | Category/ | | | |
| Office Sought: House Disbursem | oont For: | Туре | 530.00 | |
| | Primary General | | 550.50 | |
| | Other (specify) | | | |
| State: District: | Other (specify) | | Memo Item | |
| Full Name (Last, First, Middle Initial) | | | | |
| ^{C.} SCHEFFER & ASSOCIATES, P.C. | | | Date of Disbursement | |
| Mailing Address 550 BOB BLAIR DR | | | 03 22 2024 | |
| City | State Zip Code | | FEC Identification Number | |
| MINOOKA | IL 60447 | | I LO IGENINICATION NUMBER | |
| Purpose of Disbursement | · I | | C | |
| PAC ACCOUNTING SERVICES Candidate Name | Category/ | Transaction ID : SB21B.I2989 Amount of Each Disbursement this Perio | | |
| | | Type | 385.00 | |
| Office Sought: House Disbursem | | | 303.00 | |
| | Primary General | | | |
| | Other (specify) ▼ | | Memo Item | |
| State: District: | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | ······ | - 2560.00 | |
| | | | | |
| TOTAL This Period (last page this line number only). | | | | |

17

| Any information copied from such Reports and Statemer or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) COUNTRY FIRST Full Name (Last, First, Middle Initial) | | x 21b 28a used by any pers | 22 23 26 27 28b 28c 29 30b con for the purpose of soliciting contributions | | |
|--|---|----------------------------|--|--|--|
| Any information copied from such Reports and Statemer or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) COUNTRY FIRST Full Name (Last, First, Middle Initial) | Detailed Summary Page nts may not be sold or | used by any pers | 28b 28c 29 30b con for the purpose of soliciting contributions | | |
| or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) COUNTRY FIRST Full Name (Last, First, Middle Initial) | | used by any pers | on for the purpose of soliciting contributions | | |
| or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) COUNTRY FIRST Full Name (Last, First, Middle Initial) | | | | | |
| NAME OF COMMITTEE (In Full) COUNTRY FIRST Full Name (Last, First, Middle Initial) | | | | | |
| COUNTRY FIRST Full Name (Last, First, Middle Initial) | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | |
| A | | | | | |
| O' VISA | A | | | | |
| | | | Date of Disbursement | | |
| Mailing Address PO BOX 4513 | 03 19 2024 | | | | |
| | T | | | | |
| City Sta CAROL STREAM II | | | FEC Identification Number | | |
| Purpose of Disbursement | | | | | |
| SEE MEMO | C Transportion ID - CROAD 199994 | | | | |
| Candidate Name | | Category/ | Transaction ID: SB21B.I2989; Amount of Each Disbursement this Period | | |
| | | Type | | | |
| Office Sought: House Disbursemen | | | 861.81 | | |
| | rimary General | | | | |
| State: District: | ther (specify) ▼ | | Memo Item | | |
| Full Name (Last, First, Middle Initial) | | | | | |
| B. BLACKLANE | | | Date of Disbursement | | |
| DLAUNLAINE | | | M M / D D / Y Y Y Y | | |
| Mailing Address 929 COLORADO AVENUE | 03 19 2024 | | | | |
| City Sta | ate Zip Code | | | | |
| SANTA MONICA CA | 1 ' | | FEC Identification Number | | |
| Purpose of Disbursement | | | C | | |
| PAC TRAVEL EXPENSE | Transaction ID : SB21B.I29894 | | | | |
| Candidate Name | | Category/ | Amount of Each Disbursement this Period | | |
| Office Sought: House Disbursemen | nt Eor | Туре | 801.63 | | |
| | nt For: rimary | | 001.03 | | |
| | ther (specify) | | | | |
| State: District: | V 1 - 37 | | X Memo Item | | |
| | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | |
| Full Name (Last, First, Middle Initial) C. | | | Date of Disbursement | | |
| C | | | Date of Disbursement | | |
| | | | | | |
| C | ate Zip Code | | M M / D D / Y Y Y Y | | |
| Mailing Address City Sta | ate Zip Code | | | | |
| Mailing Address | ate Zip Code | | M M / D D / Y Y Y Y | | |
| Mailing Address City Sta Purpose of Disbursement | ate Zip Code | | FEC Identification Number | | |
| Mailing Address City Sta | ate Zip Code | Category/ | FEC Identification Number | | |
| Mailing Address City Sta Purpose of Disbursement | | Category/ Type | FEC Identification Number | | |
| C. Mailing Address City Sta Purpose of Disbursement Candidate Name Office Sought: House Disbursement | | | FEC Identification Number | | |
| Mailing Address City Sta Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate Pr | nt For: | | FEC Identification Number C Amount of Each Disbursement this Period | | |
| Mailing Address City Sta Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate Pr | nt For: | | FEC Identification Number | | |
| Mailing Address City Sta Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate President Ot State: District: | nt For: rimary ☐ General ther (specify) ▼ | Type | FEC Identification Number C Amount of Each Disbursement this Period Memo Item | | |
| C. Mailing Address City Sta Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate President President | nt For: rimary ☐ General ther (specify) ▼ | Type | FEC Identification Number C Amount of Each Disbursement this Period | | |

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| SCHEDULE B (FEC Form 3X) | Use separate schedule(s) | | FOR LINE NUMBER: PAGE 11 OF 12 | | | |
|--|---|------------|--------------------------------|-------------------------------------|------------------------------|--|
| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | | (check only 21b 28a | 7 one) 22 X 23 26 27 28b 28c 29 30b | | |
| Any information copied from such Reports and Stater or for commercial purposes, other than using the nan | | | | | | |
| NAME OF COMMITTEE (In Full) | and address of all | ., pontiou | | John Continuati | one nom odom committee. | |
| COUNTRY FIRST | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | Data of Diab | | |
| PHIL HEIMLICH FOR CONGRESS Mailing Address 5909 STEWART ROAD | | | | | ursement | |
| Mailing Address 5909 STEWART ROAD SUITE 1 | State 7:00-d | lo. | | 03 | 14 2024 | |
| City CINCINNATI | State Zip Cod OH 45227 | ie | | FEC Identifica | ation Number | |
| Purpose of Disbursement | | | C C00858811 | | | |
| CONTRIBUTION | | | | | ion ID : SB23.I29891 | |
| Candidate Name | | | Category/ | | ach Disbursement this Period | |
| HEIMLICH, PHIL, , , | ment Ferri 2001 | | Type | 4500.00 | | |
| Office Sought: House Disbursement For: 2024 | | | | | | |
| State: OH District: 08 | (Speeding) \ \Psi | | | Memo Ite | em | |
| Full Name (Last, First, Middle Initial) | | | | | | |
| 3. | | | | Date of Disbu | ursement | |
| Mailing Address | | | | | | |
| , | State Zip Cod | le | | FEC Identifica | ation Number | |
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| te Zip Code Z 85001 | | FEC Identification Number | |
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