

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

ADAM R. SMITH FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	<input type="text" value="29633.00"/>	<input type="text" value="29633.00"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	<input type="text" value="29633.00"/>	<input type="text" value="29633.00"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="4162.70"/>	<input type="text" value="4162.70"/>
(b) Total Offsets to Operating Expenditures (from Line 14)	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	<input type="text" value="4162.70"/>	<input type="text" value="4162.70"/>
8. Cash on Hand at Close of Reporting Period (from Line 27)	<input type="text" value="25470.30"/>	
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"/>	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

ADAM R. SMITH FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	17550.00	17550.00
(ii) Unitemized	2083.00	2083.00
(iii) TOTAL of contributions from individuals	19633.00	19633.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	10000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	29633.00	29633.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	29633.00	29633.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	4162.70	4162.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4162.70	4162.70

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	29633.00
25. SUBTOTAL (add Line 23 and Line 24).....	29633.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4162.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25470.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 13
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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)
ADAM R. SMITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHIORANDO, JOHN, , ,

Mailing Address 2686 TUSKAWILLA ROAD

City OVIEDO State FL Zip Code 32765

FEC ID number of contributing federal political committee. C

Name of Employer QUALITY ONE WIRELESS Occupation PRESIDENT

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 20 / 2025

Transaction ID : AF20456838A8A4C36A10

Amount of Each Receipt this Period
7000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CHIORANDO, JOHN, , ,

Mailing Address 2686 TUSKAWILLA ROAD

City OVIEDO State FL Zip Code 32765

FEC ID number of contributing federal political committee. C

Name of Employer QUALITY ONE WIRELESS Occupation PRESIDENT

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 20 / 2025

Transaction ID : A66D03EADD65548E782A

Amount of Each Receipt this Period
- 3500.00

Memo Item
REDESIGNATION FROM

C. Full Name (Last, First, Middle Initial)
CHIORANDO, JOHN, , ,

Mailing Address 2686 TUSKAWILLA ROAD

City OVIEDO State FL Zip Code 32765

FEC ID number of contributing federal political committee. C

Name of Employer QUALITY ONE WIRELESS Occupation PRESIDENT

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 20 / 2025

Transaction ID : A56982C570A914F848EA

Amount of Each Receipt this Period
3500.00

Memo Item
REDESIGNATION TO

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

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

7000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ADAM R. SMITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HARRIS, ALAN, , ,

Mailing Address 108 GREGORY AVE

City EVANSTON State WY Zip Code 82930

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : A404DAED85E3C4452BA3

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JOHNSON, HERSCHEL, , ,

Mailing Address 1981 CAMPBELL DR

City PISGAH FOREST State NC Zip Code 28768

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 29 / 2025

Transaction ID : A424A6D4F07E14AEF8C4

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KEENUM-ACKISS, MARGARET, , ,

Mailing Address 1051 VALLEY RIVER AVE

City MURPHY State NC Zip Code 28906-2886

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 29 / 2025

Transaction ID : AADDD5272849D4FF6BD7

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 13
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ADAM R. SMITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KING, BRENDAN, , ,

Mailing Address 2230 WATERSIDE WAY

City KESWICK State VA Zip Code 22947

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation CCG

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : A9C7778096D324A33B03

Amount of Each Receipt this Period
3500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PASQUERELLA, JEFF, , ,

Mailing Address 9 CEDAR LANE TERRACE

City OSSINING State NY Zip Code 10562-2920

FEC ID number of contributing federal political committee. C

Name of Employer DRIVEWEALTH Occupation MANAGER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2025

Transaction ID : A32F16C180AEF471995F

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROSE, SUSAN, , ,

Mailing Address 1323 CIRCLE OAK DR

City SCHERTZ State TX Zip Code 78154

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 20 / 2025

Transaction ID : AF91A2A4E47504A5485A

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 13	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
ADAM R. SMITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SMITH, MICHAEL, , ,

Mailing Address 1415 ALLISON LN

City JEFFERSONVILLE	State IN	Zip Code 47130
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FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : A497548900A6E41A8842

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)
TUIOTI, KERETI, , ,

Mailing Address 15 YERBA BUENA CT

City MONTEREY	State CA	Zip Code 93940-2547
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FEC ID number of contributing federal political committee.

Name of Employer FREEDOM STRATEGIES INC	Occupation DIRECTOR
--	------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : AB3511E7A644044ACB36

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
WETZEL, ROXAN, , ,

Mailing Address 488 FERN VALLEY DR

City MARION	State NC	Zip Code 28752
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FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : A15646A12C76B48AABF8

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="1700.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 13
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ADAM R. SMITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WETZEL, ROXAN, , ,

Mailing Address 488 FERN VALLEY DR

City MARION State NC Zip Code 28752

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 29 / 2025

Transaction ID : A46BFB3157F8840EC846

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ZEE, JEFF, , ,

Mailing Address 521 WEAVER RD

City MEMPHIS State IN Zip Code 47143

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation ENTREPRENEUR

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : AB3A9D2E54DB14BFF9DB

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-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).....▶	350.00
TOTAL This Period (last page this line number only).....▶	17550.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 13
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ADAM R. SMITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GATORPAC

Mailing Address PO BOX 1685

City: GULFPORT State: MS Zip Code: 39502-1685

FEC ID number of contributing federal political committee: **C** C00570416

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt: 09 / 29 / 2025

Transaction ID : **ADB270B81BF9740F2AB2**

Amount of Each Receipt this Period: 10000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GATORPAC

Mailing Address PO BOX 1685

City: GULFPORT State: MS Zip Code: 39502-1685

FEC ID number of contributing federal political committee: **C** C00570416

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt: 09 / 29 / 2025

Transaction ID : **AF40EE82D52D54AEB866**

Amount of Each Receipt this Period: - 5000.00

Memo Item
REDESIGNATION FROM

C. Full Name (Last, First, Middle Initial)
GATORPAC

Mailing Address PO BOX 1685

City: GULFPORT State: MS Zip Code: 39502-1685

FEC ID number of contributing federal political committee: **C** C00570416

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt: 09 / 29 / 2025

Transaction ID : **ACBB6C7C6977B4A59996**

Amount of Each Receipt this Period: 5000.00

Memo Item
REDESIGNATION TO

SUBTOTAL of Receipts This Page (optional)..... ▶	10000.00
TOTAL This Period (last page this line number only)..... ▶	10000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 13	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ADAM R. SMITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement MM / DD / YYYY 09 / 29 / 2025
Mailing Address 1340 POYDRAS ST		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-1251
Purpose of Disbursement CREDIT CARD FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 561.72
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B2CCF626D6B9F4115931
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement MM / DD / YYYY 09 / 30 / 2025
Mailing Address 1340 POYDRAS ST		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112-1251
Purpose of Disbursement CREDIT CARD FEES	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 205.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BC11B94110B254246857
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. HBIC CONSULTING LLC		Date of Disbursement MM / DD / YYYY 09 / 29 / 2025
Mailing Address 4006 SNOW LEOPARD DR		FEC Identification Number C
City COLUMBIA	State MO	Zip Code 65202-6267
Purpose of Disbursement DIGITAL CONSULTING	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B42FAA2E166F847F9A70
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2267.22
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 13	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ADAM R. SMITH FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KNIPP, TAYLOR, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2025	
Mailing Address 4006 SNOW LEOPARD DR			FEC Identification Number C	
City COLUMBIA	State MO	Zip Code 65202-6267	Amount of Each Disbursement this Period 1323.48	
Purpose of Disbursement EXPENSE REIMBURSEMENT		Category/ Type 001	Transaction ID : BD35D760E66BE4D988DB	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. IMPRINT			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2025	
Mailing Address 14550 BEECHNUT ST			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77083-5741	Amount of Each Disbursement this Period 506.94	
Purpose of Disbursement PRINTING		Category/ Type 001	Transaction ID : B02198963B1BD4016B50	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2025	
Mailing Address 475 L'ENFANT PLAZA SW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20260-0001	Amount of Each Disbursement this Period 418.00	
Purpose of Disbursement SHIPPING & POSTAGE		Category/ Type 001	Transaction ID : BC4CE931B95D44A3C8A8	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1323.48
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 13	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ADAM R. SMITH FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. FASTSIGNS		M M / D D / Y Y Y Y 09 / 19 / 2025
Mailing Address 1202 PATTON AVE		FEC Identification Number
City ASHEVILLE	State NC	Zip Code 28806-2708
Purpose of Disbursement PRINTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 268.23	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B1EC828FF54B74C1AA87
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. SAME DAY PROCESSING		M M / D D / Y Y Y Y 09 / 30 / 2025
Mailing Address 502 6TH ST		FEC Identification Number
City HUDSON	State WI	Zip Code 54016-1783
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 555.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD879E2D526C84A37B46
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C.		M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	555.00
TOTAL This Period (last page this line number only).....▶	4145.70