

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

The Raven For Congress Committee

ADDRESS (number and street)

433 Plaza Real Suite 275

Check if different
than previously
reported. (ACC)

Boca Raton

FL

33432

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00896787

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

23

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)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2025

through

M M / D D / Y Y Y Y
09 / 30 / 2025

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

Type or Print Name of Treasurer

Curtis, Elizabeth, , ,

Signature of Treasurer

Curtis, Elizabeth, , ,

Date

M M / D D / Y Y Y Y
10 / 15 / 2025

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 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

The Raven For Congress Committee

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
09 / 30 / 2025

	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))	5970.00	22762.66
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5970.00	22762.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	24548.16	87206.76
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	24548.16	87206.76
8. Cash on Hand at Close of Reporting Period (from Line 27)	227603.25	
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)	293897.05	

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

The Raven For Congress Committee

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
09 / 30 / 2025**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).....

4250.00

11000.00

(ii) Unitemized

1720.00

4794.66

(iii) TOTAL of contributions
from individuals ▶

5970.00

15794.66

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

6968.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

5970.00

22762.66

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

542000.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

542000.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

47.35

47.35

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

6017.35

564810.01

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.....	24548.16	87206.76
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	250000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	250000.00
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) ►	24548.16	337206.76

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	246134.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6017.35
25. SUBTOTAL (add Line 23 and Line 24).....	252151.41
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24548.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	227603.25

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

PAGE 5 OF 26

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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 Raven For Congress Committee

Full Name (Last, First, Middle Initial)

Fowler, Mark, , ,

A.

Mailing Address 140 Prudden Lane

Unit 201

City

Blowing Rock

State

NC

Zip Code

28605

FEC ID number of contributing
federal political committee.

C

Name of Employer
retiredOccupation
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
08		08		2025

Transaction ID : SA11AI.4528

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hallaway, Rashid, , ,

B.

Mailing Address 2638 Hampton Ave

City

Charlotte

State

NC

Zip Code

28207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ventur Govt Strategies LLC

Occupation
Partner

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		23		2025

Transaction ID : SA11AI.4446

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmarked from WinRed

Full Name (Last, First, Middle Initial)

WINRED

C.

Mailing Address 4250 FAIRFAX DR

STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		23		2025

Transaction ID : SA11AI.4446.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Earmarked from conduit. PAC limit not affected.

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

2000.00

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

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

PAGE 6 OF 26

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

Korpman, Ralph, , ,

A.

Mailing Address P O Box 3239

City

Windermere

State

FL

Zip Code

34786

FEC ID number of contributing
federal political committee.

C

Name of Employer

kmgj

Occupation

physician

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	2	5

Transaction ID : SA11AI.4541

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

Lubert, Jon, , ,

B.

Mailing Address 2652 Coach House Ln

City

Naples

State

FL

Zip Code

34105

FEC ID number of contributing
federal political committee.

C

Name of Employer

JL squared group

Occupation

Finance

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	2	5

Transaction ID : SA11AI.4512

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

Mills, Bruce, , ,

C.

Mailing Address 1950 Galleon Dr

City

Naples

State

FL

Zip Code

34102

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
0	8		2	0		2	0	2	5

Transaction ID : SA11AI.4461

Amount of Each Receipt this Period

500.00



Memo Item

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

1500.00

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

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

Mills, Bruce, , ,

A.

Mailing Address 1950 Galleon Dr

City

Naples

State

FL

Zip Code

34102

FEC ID number of contributing
federal political committee.

C

Name of Employer
retiredOccupation
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
0	8		3	0		2	0	2	5

Transaction ID : SA11AI.4460

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Williams, Dwayne, , ,

B.

Mailing Address 425 Park Lake Dr

City

Winter Springs

State

FL

Zip Code

32708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frontline InsuranceOccupation
Executive

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	2	5

Transaction ID : SA11AI.4490

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

750.00

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

4250.00

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)

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☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

HARRISON, RAVEN, , ,

A.

Mailing Address 433 PLAZA REAL
SUITE 275

City
BOCO RATON

State
FL

Zip Code
33432

FEC ID number of contributing
federal political committee.

C H6FL23139

Name of Employer
Self

Occupation
Author

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

549623.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 30 2025

Transaction ID : SA11D.4598

Amount of Each Receipt this Period

655.00

☒ Memo Item

Advance For Virtual Office

Full Name (Last, First, Middle Initial)

B.

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

Full Name (Last, First, Middle Initial)

C.

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)..... ▶

0.00

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

0.00

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

PAGE 9 OF 26

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Suite 1770City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Payment Processing Fees

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	9		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

214.30

Transaction ID : SB17.4569

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Downs, Rebecca, , ,

Mailing Address 6897 Avenbrook Blvd

City
New AlbanyState
OHZip Code
43054Purpose of Disbursement
Social Media Management

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	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

625.00

Transaction ID : SB17.4573

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Emerald Sky Group

Mailing Address 1801 Vision Dr

City
Palm Beach GardensState
FLZip Code
33418Purpose of Disbursement
Digital Management

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	8		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

425.00

Transaction ID : SB17.4582

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1264.30

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

A. Emerald Sky Group

Mailing Address 1801 Vision Dr

City
Palm Beach GardensState
FLZip Code
33418Purpose of Disbursement
Digital Management

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	9		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

425.00

Transaction ID : SB17.4589

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PAC Management Services LLCMailing Address 10521 Judicial Dr
Ste 200-ACity
FairfaxState
VAZip Code
22030Purpose of Disbursement
Compliance Services

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	7		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4572

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PAC Management Services LLCMailing Address 10521 Judicial Dr
Ste 200-ACity
FairfaxState
VAZip Code
22030Purpose of Disbursement
Compliance Services

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	8		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4581

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1425.00

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

A. PAC Management Services LLCMailing Address 10521 Judicial Dr
Ste 200-ACity
FairfaxState
VAZip Code
22030Purpose of Disbursement
Compliance Services

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	9		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4587

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Red Fox Strategies

Mailing Address PO Box 24

City
SharpsburgState
GAZip Code
30277Purpose of Disbursement
Fundraising Consulting Services

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	7		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

525.00

Transaction ID : SB17.4571

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Red Fox Strategies

Mailing Address PO Box 24

City
SharpsburgState
GAZip Code
30277Purpose of Disbursement
Fundraising Consulting Services

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	8		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

535.00

Transaction ID : SB17.4578

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1560.00

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

A. Red Fox Strategies

Mailing Address PO Box 24

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2025

City
SharpsburgState
GAZip Code
30277

FEC Identification Number

C

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

730.00

Transaction ID : SB17.4583

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Red Fox Strategies

Mailing Address PO Box 24

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2025

City
SharpsburgState
GAZip Code
30277

FEC Identification Number

C

Purpose of Disbursement
Online Fundraising Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

492.30

Transaction ID : SB17.4570

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Sorbo, Braeden, , ,Mailing Address 4095 S State Rd 7
Ste L-175

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		08		2025

City
WellingtonState
FLZip Code
33449

FEC Identification Number

C

Purpose of Disbursement
Campaign Manager Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1875.00

Transaction ID : SB17.4575

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

3097.30

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

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

PAGE 13 OF 26

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

A. Sorbo, Braeden, , ,Mailing Address 4095 S State Rd 7
Ste L-175City
WellingtonState
FLZip Code
33449Purpose of Disbursement
Campaign Manager Services

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	8		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1875.00

Transaction ID : SB17.4577

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sorbo, Braeden, , ,Mailing Address 4095 S State Rd 7
Ste L-175City
WellingtonState
FLZip Code
33449Purpose of Disbursement
Campaign Manager Services

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	8		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

625.00

Transaction ID : SB17.4580

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sorbo, Braeden, , ,Mailing Address 4095 S State Rd 7
Ste L-175City
WellingtonState
FLZip Code
33449Purpose of Disbursement
Campaign Manager Services

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	9		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.4585

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

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

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

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

A. Sorbo, Braeden, , ,Mailing Address 4095 S State Rd 7
Ste L-175City
WellingtonState
FLZip Code
33449Purpose of Disbursement
Reimbursement - itemization not required

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	9		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30.99

Transaction ID : SB17.4588

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Steve Kush Consulting LLCMailing Address 1232 Berkley Rd
Unit BCity
GibbstownState
NJZip Code
08027Purpose of Disbursement
Strategic Management Consulting

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	7		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3800.00

Transaction ID : SB17.4574

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Steve Kush Consulting LLCMailing Address 1232 Berkley Rd
Unit BCity
GibbstownState
NJZip Code
08027Purpose of Disbursement
Strategic Management Consulting

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	8		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3800.00

Transaction ID : SB17.4579

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7630.99

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

A. Steve Kush Consulting LLCMailing Address 1232 Berkley Rd
Unit BCity
GibbstownState
NJZip Code
08027Purpose of Disbursement
Strategic Management Consulting

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	9		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3800.00

Transaction ID : SB17.4584

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Steve Kush Consulting LLCMailing Address 1232 Berkley Rd
Unit BCity
GibbstownState
NJZip Code
08027Purpose of Disbursement
Reimbursement

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	9		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

727.23

Transaction ID : SB17.4586

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hilton

Mailing Address 1455 Yamato Rd

City
Boca RatonState
FLZip Code
33431Purpose of Disbursement
Lodging

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	9		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

363.23

Transaction ID : SB17.4586.0

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4527.23

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 1 Massachusetts Ave NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		05		2025

City
WashingtonState
DCZip Code
20001

FEC Identification Number

C

Purpose of Disbursement
Transportation

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

364.00

Transaction ID : SB17.4586.1

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

0.00

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

24504.82

SCHEDULE C (FEC Form 3)
LOANS

PAGE 17 OF 26

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4157

The Raven For Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRISON, RAVEN, , ,

Mailing Address

433 PLAZA REAL
SUITE 275

City

BOCO RATON

State

FL

ZIP Code

33432

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 03 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 18 OF 26

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4160

The Raven For Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRISON, RAVEN, , ,

Mailing Address

433 PLAZA REAL
SUITE 275

City

BOCO RATON

State

FL

ZIP Code

33432

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 14 / 2025

M M / D D / Y Y Y Y

On Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 19 OF 26

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4400

The Raven For Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRISON, RAVEN, , ,

Mailing Address

433 PLAZA REAL
SUITE 275

City

BOCO RATON

State

FL

ZIP Code

33432

☒ Personal Funds of the Candidate

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 01 / 2025

M M / D D / Y Y Y Y

On Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

15000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 20 OF 26

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4326

The Raven For Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

433 PLAZA REAL
SUITE 275

City

BOCO RATON

State

FL

ZIP Code

33432

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 15 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 21 OF 26

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4327

The Raven For Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRISON, RAVEN, , ,

Mailing Address

433 PLAZA REAL
SUITE 275

City

BOCO RATON

State

FL

ZIP Code

33432

☒ Personal Funds of the Candidate

Original Amount of Loan

7000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 / 02 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

7000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 22 OF 26

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4328

The Raven For Congress Committee

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRISON, RAVEN, , ,

Mailing Address

433 PLAZA REAL
SUITE 275

City

BOCO RATON

State

FL

ZIP Code

33432

☒ Personal Funds of the Candidate

Original Amount of Loan

245000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

245000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 / 27 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

245000.00

TOTALS This Period (last page in this line only).....▶

292000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 23 OF 26

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

campaign signs

Mailing Address 433 PLAZA REAL
SUITE 275City
BOCO RATONState
FLZip Code
33432

Outstanding Balance Beginning This Period

190.55

Transaction ID : SD10.4103

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

190.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

campaign signs

Mailing Address 433 PLAZA REAL
SUITE 275City
BOCO RATONState
FLZip Code
33432

Outstanding Balance Beginning This Period

179.69

Transaction ID : SD10.4104

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

179.69

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

Amazon pens

Mailing Address 433 PLAZA REAL
SUITE 275City
BOCO RATONState
FLZip Code
33432

Outstanding Balance Beginning This Period

19.99

Transaction ID : SD10.4108

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.99

1) **SUBTOTALS** This Period This Page (optional) ▶

390.23

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 24 OF 26

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

vista palm cards

Mailing Address 433 PLAZA REAL
SUITE 275

City
BOCO RATON

State
FL

Zip Code
33432

Outstanding Balance Beginning This Period

213.98

Transaction ID : SD10.4110

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

213.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

office depot business cards

Mailing Address 433 PLAZA REAL
SUITE 275

City
BOCO RATON

State
FL

Zip Code
33432

Outstanding Balance Beginning This Period

25.68

Transaction ID : SD10.4111

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.68

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

office depot bookmarks

Mailing Address 433 PLAZA REAL
SUITE 275

City
BOCO RATON

State
FL

Zip Code
33432

Outstanding Balance Beginning This Period

25.68

Transaction ID : SD10.4112

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.68

1) **SUBTOTALS** This Period This Page (optional)

265.34

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 25 OF 26

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

amazon pens

Mailing Address 433 PLAZA REAL
SUITE 275

City
BOCO RATON

State
FL

Zip Code
33432

Outstanding Balance Beginning This Period

27.98

Transaction ID : SD10.4109

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

27.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

Broward GOP

Mailing Address 433 PLAZA REAL
SUITE 275

City
BOCO RATON

State
FL

Zip Code
33432

Outstanding Balance Beginning This Period

250.00

Transaction ID : SD10.4107

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

elementor ---Israel

Mailing Address 433 PLAZA REAL
SUITE 275

City
BOCO RATON

State
FL

Zip Code
33432

Outstanding Balance Beginning This Period

63.87

Transaction ID : SD10.4106

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

63.87

1) **SUBTOTALS** This Period This Page (optional)

341.85

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 OF 26

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

The Raven For Congress Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

cards office depot

Mailing Address 433 PLAZA REAL
SUITE 275City
BOCO RATONState
FLZip Code
33432

Outstanding Balance Beginning This Period

24.08

Transaction ID : SD10.4122

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

campaign signs

Mailing Address 433 PLAZA REAL
SUITE 275City
BOCO RATONState
FLZip Code
33432

Outstanding Balance Beginning This Period

220.55

Transaction ID : SD10.4105

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

220.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HARRISON, RAVEN, , ,

Nature of Debt (Purpose):

Virtual Office

Mailing Address 433 PLAZA REAL
SUITE 275City
BOCO RATONState
FLZip Code
33432

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4597

Amount Incurred This Period

655.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

655.00

1) **SUBTOTALS** This Period This Page (optional) ▶

899.63

2) **TOTALS** This Period (last page this line number only) ▶

1897.05

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

292000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

293897.05