

**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

Gary Palmer for Congress

ADDRESS (number and street)

1919 Oxmoor Rd

#235

Homewood

AL

35209

☐ Check if different  
than previously  
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00551374

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

STATE ▼ DISTRICT

AL

06

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

through

M M /

D D /

Y Y Y Y

*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

Kilgore, Paul, , ,

Signature of Treasurer

Kilgore, Paul, , ,

Date

M M /

D D /

Y Y Y Y

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

Gary Palmer for Congress

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 6 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                             | 186802.00               | 680944.65                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 8200.00                 | 8450.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 178602.00               | 672494.65                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 100495.15               | 511983.49                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 284.40                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 100495.15               | 511699.09                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 367781.42               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                    |

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Gary Palmer for Congress

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2026

To:

MM / DD / YYYY  
03 / 31 / 2026**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).....

69200.00

378825.00

(ii) Unitemized .....

102.00

619.65

(iii) TOTAL of contributions  
from individuals ▶

69302.00

379444.65

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs) .....

117500.00

301500.00

(d) The Candidate .....

0.00

0.00

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

186802.00

680944.65

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

6612.20

32149.97

## 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

284.40

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)..... ▶

193414.20

713379.02

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 100495.15                     | 511983.49                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 8200.00                       | 8450.00                            |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 8200.00                       | 8450.00                            |
| 21. OTHER DISBURSEMENTS .....                                                | 21000.00                      | 54161.67                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 129695.15                     | 574595.16                          |

## **III. CASH SUMMARY**

|                                                                                       |           |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 304062.37 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 193414.20 |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 497476.57 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 129695.15 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 367781.42 |

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

PAGE 5 OF 61

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

ALDAG, EDWARD, KARL, , JR

A. Mailing Address 3171 OVERHILL RD

City  
MOUNTAIN BRKState  
ALZip Code  
35223-1247FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MEDICAL PROPERTIES TRUST, INC.Occupation  
CHAIRMAN

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  
03 31 2026

Transaction ID : SA11A.23671

Amount of Each Receipt this Period

7000.00

☐ Memo Item  
CONTRIBUTION

REFUNDED \$7,000.00 ON 03/31/2026

B. Full Name (Last, First, Middle Initial)  
BURGESS, ROBERT, ERNEST, , III

Mailing Address 4025 KINROSS LN

City  
BIRMINGHAMState  
ALZip Code  
35242-5833FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FIDELITY NATIONAL FINANCIAL INCOccupation  
VICE PRESIDENT - TITLE INSURANCE STAT

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  
03 31 2026

Transaction ID : SA11A.23673

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTIONC. Full Name (Last, First, Middle Initial)  
BUSSIAN, JAMES, , ,

Mailing Address 60 FAIRWAY DR.

City  
MOUNTAIN BRKState  
ALZip Code  
35213-4211FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAYNARD NEXSENOccupation  
ATTORNEY

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  
01 11 2026

Transaction ID : SA11A.22388

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

8000.00

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

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 6 OF 61

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

BUSSIAN, JAMES, , ,

**A.**

Mailing Address 60 FAIRWAY DR.

City

MOUNTAIN BRK

State

AL

Zip Code

35213-4211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAYNARD NEXSEN

Occupation

ATTORNEY

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  
01 05 2026

Transaction ID : SA11A.22389

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM JAMES BUSSIAN

Full Name (Last, First, Middle Initial)

DAVIDSON, JAMES, W., MR.,

**B.**

Mailing Address 6395 S MITCHELL MANOR CIRCLE

City

PINECREST

State

FL

Zip Code

33156-4884

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CORAL GABLES TRUST CO

Occupation

CEO

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  
03 31 2026

Transaction ID : SA11A.23658

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DEROSA, CHERRY, BRAGG, ,

**C.**

Mailing Address 1644 RIDGE RD

City

BIRMINGHAM

State

AL

Zip Code

35209-5408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

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  
02 05 2026

Transaction ID : SA11A.22586

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

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

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

3500.00

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

PAGE 7 OF 61

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

DOWNS, ABBY, W., ,

A.

Mailing Address 12 FOXCHASE DR.

City

DOTHAN

State

AL

Zip Code

36305-1147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

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 |
| 03  |   | 17  |   | 2026        |

Transaction ID : SA11A.23625

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

GOODGAME, AMY, L., ,

B.

Mailing Address 5042 MAYS BEND ROAD

City

PELL CITY

State

AL

Zip Code

35128-7396

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

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 |
| 03  |   | 17  |   | 2026        |

Transaction ID : SA11A.23628

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

GRANTHAM, JONELLE, L., ,

C.

Mailing Address 3639 HAVEN VIEW CIR

City

VESTAVIA HILLS

State

AL

Zip Code

35216-4821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

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 |
| 02  |   | 09  |   | 2026        |

Transaction ID : SA11A.22598

Amount of Each Receipt this Period

200.00

☐ Memo Item  
CONTRIBUTION

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

4200.00

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 61

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

HIGHTOWER, TIMOTHY, W., ,

**A.**

Mailing Address 960 SHADES CREST RD

City

BIRMINGHAM

State

AL

Zip Code

35226-1904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN CARPET HARDWOOD & TILE

Occupation

OWNER/PRESIDENT

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  
03 17 2026

Transaction ID : SA11A.23626

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

LEWIS, MARY , M., MS.,

**B.**

Mailing Address 6506 BLUE WING DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22307-1338

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BL PARTNERS GROUP

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  
03 31 2026

Transaction ID : SA11A.23655

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

LOVOY, JOHN, ANTHONY, , SR.

**C.**

Mailing Address 5000 LONGLEAF LN

City

BIRMINGHAM

State

AL

Zip Code

35242-3452

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

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  
02 17 2026

Transaction ID : SA11A.22623

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTION

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

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

6000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 61

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

LOVOY, JOHN, MICHAEL, , JR.

A. Mailing Address 504 FALLS CREEK DR.

City  
HELENAState  
ALZip Code  
35080-7144FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFCOccupation  
INFORMATION REQUESTED PER BEST EFF

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  
02 17 2026

Transaction ID : SA11A.22622

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTIONB. Full Name (Last, First, Middle Initial)  
MAYFIELD, TARA, GROOVER, MRS.,  
Mailing Address 34 COUNTRY CLUB BLVDCity  
MOUNTAIN BRKState  
ALZip Code  
35213-4225FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFFCOccupation  
INFORMATION REQUESTED PER BEST EFF

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  
03 31 2026

Transaction ID : SA11A.23672

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTIONC. Full Name (Last, First, Middle Initial)  
MAYFIELD, TOM, , ,  
Mailing Address 34 COUNTRY CLUB BOULEVARDCity  
BIRMINGHAMState  
ALZip Code  
35213-4225FEC ID number of contributing  
federal political committee.

C

Name of Employer  
M3 RESOURCESOccupation  
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  
03 31 2026

Transaction ID : SA11A.23676

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTION

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

10500.00

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 10 OF 61

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

MCDONALD, JAMES, R., , JR.

**A.**

Mailing Address 261 WINGATE DR

City

MONTGOMERY

State

TX

Zip Code

77356-8264

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BAKER

Occupation

CONSTRUCTION

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  
02 05 2026

Transaction ID : SA11A.22587

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MCWANE, PHILLIP, , ,

**B.**

Mailing Address 2848 SOUTHWOOD RD

City

MOUNTAIN BRK

State

AL

Zip Code

35223-1231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCWANE, INC.

Occupation

CHARIMAN

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  
03 31 2026

Transaction ID : SA11A.23674

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MILNE, JOHN, D., MR.,

**C.**

Mailing Address 409 G ST SE

City

WASHINGTON

State

DC

Zip Code

20003-4257

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MWS GLOBAL

Occupation

LOBBYIST

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  
03 31 2026

Transaction ID : SA11A.23653

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

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

4000.00

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

PAGE 11 OF 61

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

MULLEN, RICHARD , , ,

A.

Mailing Address 101 CABER COURT

City

VESTAVIA

State

AL

Zip Code

35242-0513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DRUMMOND CO., INC.

Occupation

EXECUTIVE

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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11A.23677

Amount of Each Receipt this Period

1000.00



Memo Item

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

RILEY, SHANNON, SIMPSON, ,

Mailing Address 3505 BROOKWOOD RD

City

MOUNTAIN BRK

State

AL

Zip Code

35223-1445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 7 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11A.23624

Amount of Each Receipt this Period

2000.00



Memo Item

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

ROBERTS, RICHARD, Y., MR.,

Mailing Address 3916 BENTWOOD CT

City

FAIRFAX

State

VA

Zip Code

22031-3252

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 2 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11A.22603

Amount of Each Receipt this Period

1000.00



Memo Item

CONTRIBUTION

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

4000.00

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 12 OF 61

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

ROWAN, MARC, J., MR,

**A.** Mailing Address 65 EAST 55TH STREET

City  
NEW YORK

State  
NY

Zip Code  
10022-3219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
APOLLO GLOBAL MANAGEMENT

Occupation  
CEO

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  
03 11 2026

Transaction ID : SA11A.23623

Amount of Each Receipt this Period

3500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEAKLEY, LINDA, , ,

**B.** Mailing Address 2620 LEGACY PRESERVE DR. SE

City  
BROWNSBORO

State  
AL

Zip Code  
35741-8903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUNTSVILLE HOSPITAL

Occupation  
RDN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 05 2026

Transaction ID : SA11A.22590

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

SEE REDESIGNATION

Full Name (Last, First, Middle Initial)

STEAKLEY, LINDA, , ,

**C.** Mailing Address 2620 LEGACY PRESERVE DR. SE

City  
BROWNSBORO

State  
AL

Zip Code  
35741-8903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUNTSVILLE HOSPITAL

Occupation  
RDN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 05 2026

Transaction ID : SA11A.22594

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

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

8500.00

**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 13 OF 61

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

STEAKLEY, LINDA, , ,

**A.**

Mailing Address 2620 LEGACY PRESERVE DR. SE

City

BROWNSBORO

State

AL

Zip Code

35741-8903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HUNTSVILLE HOSPITAL

Occupation

RDN

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 05 2026

Transaction ID : SA11A.22595

Amount of Each Receipt this Period

1500.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

STEAKLEY, RODERIC, G., ,

**B.**

Mailing Address 2620 LEGACY PRESERVE DR. SE

City

BROWNSBORO

State

AL

Zip Code

35741-8903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SIROTE AND PERMUTT

Occupation

PARTNER

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 05 2026

Transaction ID : SA11A.22591

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

SEE REDESIGNATION

Full Name (Last, First, Middle Initial)

STEAKLEY, RODERIC, G., ,

**C.**

Mailing Address 2620 LEGACY PRESERVE DR. SE

City

BROWNSBORO

State

AL

Zip Code

35741-8903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SIROTE AND PERMUTT

Occupation

PARTNER

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 05 2026

Transaction ID : SA11A.22592

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION TO GENERAL

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

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

5000.00

# **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)

PAGE 14 OF 61

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

STEAKLEY, RODERIC, G., ,

**A.**

Mailing Address 2620 LEGACY PRESERVE DR. SE

City

BROWNSBORO

State

AL

Zip Code

35741-8903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SIROTE AND PERMUTT

Occupation

PARTNER

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 05 2026

Transaction ID : SA11A.22593

Amount of Each Receipt this Period

1500.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

OAK GROVE STRATEGIES LLC

**B.**

Mailing Address 7400 RIDGECREST COURT RD

City

VESTAVIA

State

AL

Zip Code

35242-0525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11A.23678

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

PENDING VERIFICATION PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

SOUTHPOINT BANK

**C.**

Mailing Address 3501 GRANDVIEW PARKWAY

City

BIRMINGHAM

State

AL

Zip Code

35243-1930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11A.23681

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

REFUNDED \$1,000.00 ON 03/31/2026

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

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

2000.00

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

PAGE 15 OF 61

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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 ▼

62526.90

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 9 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11C.22596

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

B.

Full Name (Last, First, Middle Initial)

HIGHTOWER, WILLIAM, , ,

Mailing Address 204 ASHEBORO

City

FRANKLIN

State

TN

Zip Code

37064-3289

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

TOWER STRATEGIES

PRESIDENT

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 | 1 |   | 3 | 0 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11A.22597

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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 ▼

62526.90

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 2 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11C.22611

Amount of Each Receipt this Period

11000.00

☒ Memo Item  
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

500.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 61

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
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| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

DIAZ, JOSE, , ,

A.

Mailing Address 9270 SW 94TH CT

City  
MIAMIState  
FLZip Code  
33176-2200FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BALLARD PARTNERSOccupation  
ATTORNEY

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 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11A.22612

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

DREW, ROBERT, , ,

B.

Mailing Address 10 EDGEWATER DRIVE

City  
MIAMIState  
FLZip Code  
33133-6961FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 4 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11A.22614

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

REATTRIBUTION INFORMATION REQUESTED

Full Name (Last, First, Middle Initial)

GOERSCH, KLAUS, , ,

C.

Mailing Address 1687 HIGHWAY A1A

City  
SATELLITE BEACHState  
FLZip Code  
32937-5428FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATLAS AIROccupation  
CHIEF OPERATING OFFICER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 5 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11A.22613

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

8000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 61

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

KOPCSAY, GEORGE, , ,

A.

Mailing Address 4 OAKLEIGH CT

City  
NORWALKState  
CTZip Code  
06853-1220FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATLAS AIR WORLDWIDEOccupation  
GENERAL COUNSEL

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02  | 23  | 2026    |

Transaction ID : SA11A.22616

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

SIEGEL, DAVID, , ,

Mailing Address 2821 S BAYSHORE DR

City  
MIAMIState  
FLZip Code  
33133-6019FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DNS CAPITAL PARTNERSOccupation  
ADVISOR

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02  | 24  | 2026    |

Transaction ID : SA11A.22615

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

62526.90

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 30  | 2026    |

Transaction ID : SA11C.23632

Amount of Each Receipt this Period

500.00

☒ Memo Item  
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

3000.00

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

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 PageFOR LINE NUMBER:  
(check only one)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                                      | 13a                          | 13b                          | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

CAMPAGNA, SHANNON, , ,

A.

Mailing Address 8819 GATESHEAD ROAD

City

ALEXANDRIA

State

VA

Zip Code

22309-4022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

LOBBYIST

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 | 3 |   | 2 | 5 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11A.23633

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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 ▼

62526.90

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11C.23641

Amount of Each Receipt this Period

1500.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

C.

Full Name (Last, First, Middle Initial)

CULLEN, THOMAS, , ,

Mailing Address 5701 SOUTH SANTA FE DRIVE

City

LITTLETON

State

CO

Zip Code

80120-1813

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ECHOSTAR

Occupation

EXEC

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11A.23642

Amount of Each Receipt this Period

1500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

2000.00

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

69200.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

RUDY FOR INDIANA

**A.**

Mailing Address PO BOX 26141

City

ALEXANDRIA

State

VA

Zip Code

22313-6141

FEC ID number of contributing  
federal political committee.

**C** C00822767

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11C.23638

Amount of Each Receipt this Period

4000.00

☐ Memo Item

CONTRIBUTION

SEE REDESIGNATION

**B.**

Full Name (Last, First, Middle Initial)

RUDY FOR INDIANA

Mailing Address PO BOX 26141

City

ALEXANDRIA

State

VA

Zip Code

22313-6141

FEC ID number of contributing  
federal political committee.

**C** C00822767

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11C.23639

Amount of Each Receipt this Period

2000.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION FROM PRIMARY

**C.**

Full Name (Last, First, Middle Initial)

RUDY FOR INDIANA

Mailing Address PO BOX 26141

City

ALEXANDRIA

State

VA

Zip Code

22313-6141

FEC ID number of contributing  
federal political committee.

**C** C00822767

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11C.23640

Amount of Each Receipt this Period

- 2000.00

☒ Memo Item

CONTRIBUTION

REDESIGNATION TO GENERAL

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

4000.00

**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  
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(check only one)

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

ACME BRICK COMPANY GOOD GOVERNMENT FUND FOR FEDERAL ELECTION

Mailing Address P. O. BOX 425

City

FORT WORTH

State

TX

Zip Code

76101-0425

FEC ID number of contributing  
federal political committee.

C C00424010

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 9 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11C.22600

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

ALABAMA POWER CO EMPLOYEES FEDERAL POLITICAL ACTION CMTE (AP

Mailing Address 600 NORTH 18TH STREET  
PO BOX 2641

City

BIRMINGHAM

State

AL

Zip Code

35291-0001

FEC ID number of contributing  
federal political committee.

C C00077305

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11C.23675

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN FOREST &amp; PAPER ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 601 THIRTEENTH ST, NW  
SUITE 1000N

City

WASHINGTON

State

DC

Zip Code

20005-6713

FEC ID number of contributing  
federal political committee.

C C00029348

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11C.23667

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
 CONTRIBUTION

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

9000.00

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  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL**

Mailing Address PALLADIAN 1

220 LEIGH FARM RD

City

DURHAM

State

NC

Zip Code

27707-8110

FEC ID number of contributing  
federal political committee.

**C** C00077321

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 02 2026

Transaction ID : SA11C.22604

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND**

Mailing Address P.O. BOX 66

City

DANIA BEACH

State

FL

Zip Code

33004-0066

FEC ID number of contributing  
federal political committee.

**C** C00027532

Name of Employer

Occupation

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  
03 31 2026

Transaction ID : SA11C.23680

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALIT**

Mailing Address 1201 15TH STREET NW

SUITE 400

City

WASHINGTON

State

DC

Zip Code

20005-2899

FEC ID number of contributing  
federal political committee.

**C** C00358663

Name of Employer

Occupation

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  
03 24 2026

Transaction ID : SA11C.23636

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

5500.00

**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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**AMERICAN UROLOGICAL ASSOCIATION, INC. POLITICAL ACTION COMMI**

**A.**

Mailing Address 1000 CORPORATE BLVD

City

LINTHICUM

State

MD

Zip Code

21090-2260

FEC ID number of contributing  
federal political committee.

**C** C00691741

Name of Employer

Occupation

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  
03 02 2026

**Transaction ID : SA11C.22610**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**AMERICAN WATER WORKS COMPANY, INC. EMPLOYEE FEDERAL PAC**

**B.**

Mailing Address 1 WATER STREET

City

CAMDEN

State

NJ

Zip Code

08102-1658

FEC ID number of contributing  
federal political committee.

**C** C00354548

Name of Employer

Occupation

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  
03 31 2026

**Transaction ID : SA11C.23664**

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 2000 WESTCHESTER AVENUE

City

PURCHASE

State

NY

Zip Code

10577-2539

FEC ID number of contributing  
federal political committee.

**C** C00478099

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

**Transaction ID : SA11C.23650**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

8000.00

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

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

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for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 2000 WESTCHESTER AVENUE

City

PURCHASE

State

NY

Zip Code

10577-2539

FEC ID number of contributing  
federal political committee.

**C** C00478099

Name of Employer

Occupation

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11C.23651

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BALCH AND BINGHAM LLP FEDERAL POLITICAL COMMITTEE**

Mailing Address 1710 SIXTH AVENUE NORTH

City

BIRMINGHAM

State

AL

Zip Code

35203-2015

FEC ID number of contributing  
federal political committee.

**C** C00358440

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 09 2026

Transaction ID : SA11C.22621

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BASF CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1350 I ST NW  
SUITE 850

City

WASHINGTON

State

DC

Zip Code

20005-3346

FEC ID number of contributing  
federal political committee.

**C** C00340075

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11C.23656

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

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

11500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**BASF CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1350 I ST NW

SUITE 850

City

WASHINGTON

State

DC

Zip Code

20005-3346

FEC ID number of contributing  
federal political committee.**C** C00340075

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2026    |

Transaction ID : SA11C.23657

Amount of Each Receipt this Period

1500.00



Memo Item

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)

**BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL AC**

Mailing Address 675 15TH STREET

SUITE 2900

City

DENVER

State

CO

Zip Code

80202-4287

FEC ID number of contributing  
federal political committee.**C** C00390583

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2026    |

Transaction ID : SA11C.23661

Amount of Each Receipt this Period

2000.00



Memo Item

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)

**BRADLEY ARANT BOULT CUMMINGS LLP FEDERAL POLITICAL ACTION CO**

Mailing Address 1819 5TH AVENUE NORTH

City

BIRMINGHAM

State

AL

Zip Code

35203-2120

FEC ID number of contributing  
federal political committee.**C** C00500017

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2026    |

Transaction ID : SA11C.23670

Amount of Each Receipt this Period

2500.00



Memo Item

CONTRIBUTION

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

6000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**BRICK INDUSTRY ASSOCIATION'S BRICK PAC FOR A STRONGER AMERIC****A.**Mailing Address 12007 SUNRISE VALLEY DRIVE  
SUITE 430City  
RESTONState  
VAZip Code  
20191-3495FEC ID number of contributing  
federal political committee.**C** C00429712

Name of Employer

Occupation

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 09  |   | 2026    |

**Transaction ID : SA11C.22599**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION
**B.**

Full Name (Last, First, Middle Initial)

**BRINGING REPUBLICAN EXCELLENCE TO TOWN PAC**

Mailing Address PO BOX 22401

City  
LOUISVILLEState  
KYZip Code  
40252-0401FEC ID number of contributing  
federal political committee.**C** C00483487

Name of Employer

Occupation

Receipt For: 2026

☐ Primary    ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2026    |

**Transaction ID : SA11C.23654**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 CONTRIBUTION
**C.**

Full Name (Last, First, Middle Initial)

**BRINGING REPUBLICAN EXCELLENCE TO TOWN PAC**

Mailing Address PO BOX 22401

City  
LOUISVILLEState  
KYZip Code  
40252-0401FEC ID number of contributing  
federal political committee.**C** C00483487

Name of Employer

Occupation

Receipt For: 2026

☐ Primary    ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2026    |

**Transaction ID : SA11C.23679**

Amount of Each Receipt this Period

2500.00

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

|         |
|---------|
| 7500.00 |
|---------|

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

Use separate schedule(s)  
for each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**BUILDING AMERICAN CONSERVATISM PAC**

Mailing Address 7415 SOUTHWEST PKWY, BLDG 6  
STE 500-134

City  
AUSTIN

State  
TX

Zip Code  
78735-7827

FEC ID number of contributing  
federal political committee.

**C** C00553883

Name of Employer

Occupation

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  
03 31 2026

Transaction ID : SA11C.23663

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**DRUMMOND COMPANY, INC. POLITICAL ACTION COMMITTEE (DPAC)**

Mailing Address P.O. BOX 10246

City  
BIRMINGHAM

State  
AL

Zip Code  
35202-0246

FEC ID number of contributing  
federal political committee.

**C** C00160630

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 17 2026

Transaction ID : SA11C.23627

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTI**

Mailing Address 975 F STREET, NW  
SUITE 560

City  
WASHINGTON

State  
DC

Zip Code  
20004-1516

FEC ID number of contributing  
federal political committee.

**C** C00217638

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11C.23668

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

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

9500.00

**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)

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14TH STREET, NW  
SUITE 800

City  
WASHINGTON

State  
DC

Zip Code  
20005-2099

FEC ID number of contributing  
federal political committee.

**C** C00236489

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2026

Transaction ID : SA11C.23629

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**LAND OF OPPORTUNITY PAC**

Mailing Address PO BOX 21097

City  
HOT SPRINGS

State  
AR

Zip Code  
71903-1097

FEC ID number of contributing  
federal political committee.

**C** C00607721

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2026

Transaction ID : SA11C.23631

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**MAXIMUS INC. POLITICAL ACTION COMMITTEE (MAXPAC)**

Mailing Address 1600 TYSON BLVD  
SUITE 1400

City  
MCLEAN

State  
VA

Zip Code  
22102-4893

FEC ID number of contributing  
federal political committee.

**C** C00343707

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2026

Transaction ID : SA11C.23662

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

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

9000.00

**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

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(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)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**MCKESSON CORPORATION EMPLOYEES POLITICAL FUND**

**A.**

Mailing Address 505 9TH STREET NW

SUITE 901

City

WASHINGTON

State

DC

Zip Code

20004-2173

FEC ID number of contributing  
federal political committee.

**C** C00108035

Name of Employer

Occupation

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  
03 31 2026

Transaction ID : SA11C.23665

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF BENEFITS AND INSURANCE PROFESSIONALS**

**B.**

Mailing Address 999 E STREET, NW

SUITE 400

City

WASHINGTON

State

DC

Zip Code

20004-2007

FEC ID number of contributing  
federal political committee.

**C** C00283135

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 02 2026

Transaction ID : SA11C.22608

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address 430 NORTH MICHIGAN AVENUE

City

CHICAGO

State

IL

Zip Code

60611-4011

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 25 2026

Transaction ID : SA11C.23634

Amount of Each Receipt this Period

3000.00

☐ Memo Item  
CONTRIBUTION

**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 PageFOR LINE NUMBER:  
(check only one)

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|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12                           | 13a                          | 13b                                     | 14                           |                             |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION

Mailing Address 1600 DUKE STREET

City

ALEXANDRIA

State

VA

Zip Code

22314-3466

FEC ID number of contributing  
federal political committee.

C C00126763

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2026    |

Transaction ID : SA11C.23646

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF WATER COMPANIES POLITICAL ACTION COM

Mailing Address 50 S. 16TH STREET  
SUITE 2725

City

PHILADELPHIA

State

PA

Zip Code

19102-2504

FEC ID number of contributing  
federal political committee.

C C00075275

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2026    |

Transaction ID : SA11C.23660

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMI

Mailing Address 1101 KING STREET  
SUITE 600

City

ALEXANDRIA

State

VA

Zip Code

22314-2965

FEC ID number of contributing  
federal political committee.

C C00144766

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2026    |

Transaction ID : SA11C.23645

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

10000.00

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  
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(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)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**

**A.**

Mailing Address 100 DAINGERFIELD ROAD

City

ALEXANDRIA

State

VA

Zip Code

22314-3391

FEC ID number of contributing  
federal political committee.

**C** C00030809

Name of Employer

Occupation

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  
03 31 2026

Transaction ID : SA11C.23652

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**NATIONAL SHOOTING SPORTS FOUNDATION, INC. POLITICAL ACTION C**

**B.**

Mailing Address 400 N. CAPITOL STREET NW  
SUITE 475

City

WASHINGTON

State

DC

Zip Code

20001-1593

FEC ID number of contributing  
federal political committee.

**C** C00480863

Name of Employer

Occupation

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  
03 09 2026

Transaction ID : SA11C.22620

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**NOSSAMAN LLP POLITICAL ACTION COMMITTEE (NOSSAMAN PAC)**

**C.**

Mailing Address 1401 NEW YORK AVENUE NW SUITE 800

City

WASHINGTON

State

DC

Zip Code

20005-2143

FEC ID number of contributing  
federal political committee.

**C** C00473652

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 20 2026

Transaction ID : SA11C.23635

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

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

4500.00

**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  
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(check only one)

PAGE 31 OF 61

|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**POLARIS INDUSTRIES POLITICAL PARTICIPATION PROGRAM****A.**

Mailing Address 2100 HIGHWAY 55

City

MEDINA

State

MN

Zip Code

55340-9770

FEC ID number of contributing  
federal political committee.**C** C00279497

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11C.23649

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**PROTECTIVE LIFE CORPORATION FEDERAL PAC****B.**

Mailing Address P.O. BOX 2606

City

BIRMINGHAM

State

AL

Zip Code

35202-2606

FEC ID number of contributing  
federal political committee.**C** C00161414

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11C.23647

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE****C.**Mailing Address 1015 15TH STREET NW  
SUITE 920

City

WASHINGTON

State

DC

Zip Code

20005-2623

FEC ID number of contributing  
federal political committee.**C** C00432252

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA11C.23648

Amount of Each Receipt this Period

5000.00

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

12000.00

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

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

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**REPUBLICANS UNITED TO DEFEND YOU PAC (RUDY PAC)**

**A.**

Mailing Address PO BOX 26141

City

ALEXANDRIA

State

VA

Zip Code

22313-6141

FEC ID number of contributing  
federal political committee.

**C** C00823351

Name of Employer

Occupation

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  
03 31 2026

Transaction ID : SA11C.23637

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**TEXTILE RENTAL SERVICES ASSOCIATION OF AMERICA POLITICAL ACT**

**B.**

Mailing Address 1800 DIAGONAL ROAD SUITE 200

City

ALEXANDRIA

State

VA

Zip Code

22314-2842

FEC ID number of contributing  
federal political committee.

**C** C00279828

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11C.23659

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**THE AMERICAN ELECTRIC POWER COMMITTEE FOR RESPONSIBLE GOVERN**

**C.**

Mailing Address 1 RIVERSIDE PLAZA - 26TH FLOOR

City

COLUMBUS

State

OH

Zip Code

43215-2355

FEC ID number of contributing  
federal political committee.

**C** C00096842

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2026

Transaction ID : SA11C.23666

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION C**

**A.**

Mailing Address 4301 WILSON BOULEVARD

City  
ARLINGTON

State  
VA

Zip Code  
22203-4419

FEC ID number of contributing  
federal political committee.

**C** C00002972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 02 2026

Transaction ID : SA11C.22606

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**US ENERGY PAC (THE PAC OF AMERICAN EXPLORATION & PRODUCTION**

**B.**

Mailing Address 999 E STREET, NW  
SUITE 200

City  
WASHINGTON

State  
DC

Zip Code  
20004-2041

FEC ID number of contributing  
federal political committee.

**C** C00755454

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 02 2026

Transaction ID : SA11C.22609

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**VULCAN MATERIALS COMPANY POLITICAL ACTION COMMITTEE**

**C.**

Mailing Address P.O. BOX 385014

City  
BIRMINGHAM

State  
AL

Zip Code  
35238-5014

FEC ID number of contributing  
federal political committee.

**C** C00116020

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 02 2026

Transaction ID : SA11C.22605

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

9000.00

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

117500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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|                                        |                              |                              |                              |                             |
|----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a           | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <input checked="" type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

PALMER VICTORY COMMITTEE

A.

Mailing Address 1919 OXMOOR RD

#223

City

HOMEWOOD

State

AL

Zip Code

35209-3502

FEC ID number of contributing  
federal political committee.

C

C00624627

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

32149.97

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 9 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA12.23620

Amount of Each Receipt this Period

3306.10



Memo Item

TRANSFER

TRANSFER OF NET JFC FUNDS

B.

Full Name (Last, First, Middle Initial)

WORTHINGTON, ALLAN, D., ,

Mailing Address 537 CASTLEBRIDGE LANE

City

SHOAL CREEK

State

AL

Zip Code

35242-7206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

DOMINION PARTNERS

REAL ESTATE

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 9 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA.22619.14.26Q1

Amount of Each Receipt this Period

3500.00



Memo Item

TRANSFER

TRANSFER FROM PALMER VICTORY COMMITTEE

C.

Full Name (Last, First, Middle Initial)

PALMER VICTORY COMMITTEE

Mailing Address 1919 OXMOOR RD

#223

City

HOMEWOOD

State

AL

Zip Code

35209-3502

FEC ID number of contributing  
federal political committee.

C

C00624627

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

32149.97

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 9 |   | 2 | 0 | 2 | 6 |

Transaction ID : SA12.23621

Amount of Each Receipt this Period

3306.10



Memo Item

TRANSFER

TRANSFER OF NET JFC FUNDS

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

6612.20

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

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

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NAME OF COMMITTEE (In Full)

**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

WORTHINGTON, ALLAN, D., ,

**A.** Mailing Address 537 CASTLEBRIDGE LANE

City  
SHOAL CREEK

State  
AL

Zip Code  
35242-7206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DOMINION PARTNERS

Occupation  
REAL ESTATE

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  
03 / 09 / 2026

Transaction ID : SA.22619.15.26Q1

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM PALMER VICTORY COMMITTEE

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)..... ▶

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

0.00

6612.20

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

PAGE 36 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. ALLEN, TERRY, , ,**

Mailing Address 18951 PENINSULA POINT DRIVE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 13  |   | 2026    |

City  
CORNELIUSState  
NCZip Code  
28031-7599Purpose of Disbursement  
SALARY

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1666.66

Transaction ID : SB17.I18364

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALLEN, TERRY, , ,**

Mailing Address 18951 PENINSULA POINT DRIVE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 15  |   | 2026    |

City  
CORNELIUSState  
NCZip Code  
28031-7599Purpose of Disbursement  
SALARY

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1666.66

Transaction ID : SB17.I18398

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLEN, TERRY, , ,**

Mailing Address 18951 PENINSULA POINT DRIVE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 11  |   | 2026    |

City  
CORNELIUSState  
NCZip Code  
28031-7599Purpose of Disbursement  
SALARY

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1666.66

Transaction ID : SB17.I19440

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

4999.98

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 61

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. PALMER, GARY, JAMES, ,**

Mailing Address 1973 CAHABA CREST DR.

City  
BIRMINGHAMState  
ALZip Code  
35242-4414Purpose of Disbursement  
REIMBURSEMENT- SEE MEMO

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 |
| 03  |   | 05  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1729.65

Transaction ID : SB17.I18423

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PALMER, GARY, JAMES, ,**

Mailing Address 1973 CAHABA CREST DR.

City  
BIRMINGHAMState  
ALZip Code  
35242-4414Purpose of Disbursement  
MILEAGE 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 |
| 03  |   | 05  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

699.58

Transaction ID : SB17.I19438

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHICK-FIL-A**

Mailing Address 211 LAKESHORE PKWY

City  
HOMEWOODState  
ALZip Code  
35209-7108Purpose of Disbursement  
MEETING EXPENSE

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 |
| 03  |   | 05  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

21.12

Transaction ID : SB17.I19436

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

1729.65

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 61

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. UBER**Mailing Address 182 HOWARD ST  
# 8City  
SAN FRANCISCOState  
CAZip Code  
94105-1611Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 5 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

268.07

Transaction ID : SB17.I19437

☒ Memo Item**B. UPS**

Mailing Address 1919 OXMOOR RD

City  
HOMWOODState  
ALZip Code  
35209-3502Purpose of Disbursement  
SHIPPING

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 5 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

83.01

Transaction ID : SB17.I19435

☒ Memo Item**C. VECTOR SECURITY, INC**

Mailing Address PO BOX 89462

City  
CLEVELANDState  
OHZip Code  
89462Purpose of Disbursement  
RESIDENTIAL SECURITY EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 5 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

109.39

Transaction ID : SB17.I19432

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address 1095 AVENUE OF THE AMERICAS

City  
NEW YORKState  
NYZip Code  
10036-6797Purpose of Disbursement  
TELEPHONE

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 | 3 |   | 0 | 5 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

270.47

Transaction ID : SB17.I19433

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BLVD

City  
FORTH WORTHState  
TXZip Code  
76155-2605Purpose of Disbursement  
TRAVEL EXPENSE

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 | 1 |   | 2 | 6 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

204.48

Transaction ID : SB17.I18392

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AUTO OWNERS INSURANCE**

Mailing Address 120 E 5TH ST

City  
TUSCUMBIAState  
ALZip Code  
35674-2443Purpose of Disbursement  
INSURANCE

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 | 1 |   | 0 | 6 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

741.00

Transaction ID : SB17.I18369

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

945.48

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
MEETING EXPENSE

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|                   |                                            |                                  |
|-------------------|--------------------------------------------|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

State: District:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 01 / 20 / 2026      |

FEC Identification Number

C

Amount of Each Disbursement this Period

911.32

Transaction ID : SB17.I18375

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
MEETING EXPENSE

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|                   |                                            |                                  |
|-------------------|--------------------------------------------|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

State: District:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 02 / 18 / 2026      |

FEC Identification Number

C

Amount of Each Disbursement this Period

128.02

Transaction ID : SB17.I18412

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
MEETING EXPENSE

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|                   |                                            |                                  |
|-------------------|--------------------------------------------|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

State: District:

Date of Disbursement

|                     |
|---------------------|
| M M / D D / Y Y Y Y |
| 03 / 17 / 2026      |

FEC Identification Number

C

Amount of Each Disbursement this Period

654.89

Transaction ID : SB17.I19451

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

1694.23

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. CHICK-FIL-A**

Mailing Address 211 LAKESHORE PKWY

City  
HOMEWOODState  
ALZip Code  
35209-7108Purpose of Disbursement  
MEETING EXPENSE

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 |
| 01  |   | 16  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

83.67

Transaction ID : SB17.I18368

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHICK-FIL-A**

Mailing Address 211 LAKESHORE PKWY

City  
HOMEWOODState  
ALZip Code  
35209-7108Purpose of Disbursement  
MEETING EXPENSE

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 |
| 02  |   | 03  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

51.35

Transaction ID : SB17.I18387

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHICK-FIL-A**

Mailing Address 211 LAKESHORE PKWY

City  
HOMEWOODState  
ALZip Code  
35209-7108Purpose of Disbursement  
MEETING EXPENSE

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 |
| 02  |   | 17  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

457.16

Transaction ID : SB17.I18414

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

592.18

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. CHICK-FIL-A**

Mailing Address 211 LAKESHORE PKWY

City  
HOMEWOODState  
ALZip Code  
35209-7108Purpose of Disbursement  
MEETING EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 06  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

60.39

Transaction ID : SB17.I18425

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**Mailing Address 1593 SPRING HILL RD  
#400City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 21  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.I18373

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**Mailing Address 1593 SPRING HILL RD  
#400City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 19  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I18409

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

1960.39

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. CMDI**Mailing Address 1593 SPRING HILL RD  
#400City  
VIENNAState  
VAZip Code  
22182Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 19  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I19459

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONSERVATIVE PARTNERSHIP CENTER**

Mailing Address 300 INDEPENDENCE AVENUE SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
MEMBERSHIP DUES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 09  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.I18426

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO RD

City  
WALTHAMState  
MAZip Code  
02451-7333Purpose of Disbursement  
MARKETING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 28  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

371.00

Transaction ID : SB17.I18390

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

6371.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 61

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO RD

City  
WALTHAMState  
MAZip Code  
02451-7333Purpose of Disbursement  
MARKETING CONSULTING

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 2 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

371.00

Transaction ID : SB17.I18421

☐ Memo Item**B. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO RD

City  
WALTHAMState  
MAZip Code  
02451-7333Purpose of Disbursement  
MARKETING CONSULTING

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 0 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

371.00

Transaction ID : SB17.I19474

☐ Memo Item**C. DELTA**

Mailing Address 1030 DELTA BLVD

City  
ATLANTAState  
GAZip Code  
30354-1989Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 4 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

943.40

Transaction ID : SB17.I18408

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

1685.40

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 61

|                                               |                              |                              |                              |
|-----------------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a                  | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. DELTA**

Mailing Address 1030 DELTA BLVD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 02  |   | 2026    |

City  
ATLANTAState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

877.20

Transaction ID : SB17.I18422

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. DELTA**

Mailing Address 1030 DELTA BLVD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 09  |   | 2026    |

City  
ATLANTAState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1281.90

Transaction ID : SB17.I19426

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. ELMORE COUNTY GOP**

Mailing Address PO BOX 1146

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 13  |   | 2026    |

City  
WETUMPKAState  
ALZip Code  
36092

FEC Identification Number

C

Purpose of Disbursement  
SPONSORSHIP

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.I18365

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

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

3659.10

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. FOCUS CREATIVE**

Mailing Address 3658 JAMES HILL TERRACE

City  
HOOVERState  
ALZip Code  
35226Purpose of Disbursement  
PHOTOGRAPHY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 06  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2750.00

Transaction ID : SB17.I18357

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FOCUS CREATIVE**

Mailing Address 3658 JAMES HILL TERRACE

City  
HOOVERState  
ALZip Code  
35226Purpose of Disbursement  
PHOTOGRAPHY

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 26  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2750.00

Transaction ID : SB17.I18415

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GODADDY.COM**Mailing Address 14455 N HAYDEN RD  
ST 219City  
SCOTTSDALEState  
AZZip Code  
85260-6993Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

42.18

Transaction ID : SB17.I19473

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

5542.18

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 02  |   | 2026    |

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1351

FEC Identification Number

C

Purpose of Disbursement  
ADVERTISING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

109.20

Transaction ID : SB17.I18355

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 02  |   | 2026    |

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1351

FEC Identification Number

C

Purpose of Disbursement  
ADVERTISING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

109.20

Transaction ID : SB17.I18389

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 02  |   | 2026    |

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1351

FEC Identification Number

C

Purpose of Disbursement  
ADVERTISING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

118.20

Transaction ID : SB17.I18420

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

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

336.60

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 61

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. GVI 2014 LLC**Mailing Address 2 METROPLEX DR  
STE 215City  
BIRMINGHAMState  
ALZip Code  
35209-6800Purpose of Disbursement  
RENT

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 |
| 01  |   | 02  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

345.00

Transaction ID : SB17.I18354

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GVI 2014 LLC**Mailing Address 2 METROPLEX DR  
STE 215City  
BIRMINGHAMState  
ALZip Code  
35209-6800Purpose of Disbursement  
RENT

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 |
| 02  |   | 02  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

345.00

Transaction ID : SB17.I18388

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GVI 2014 LLC**Mailing Address 2 METROPLEX DR  
STE 215City  
BIRMINGHAMState  
ALZip Code  
35209-6800Purpose of Disbursement  
RENT

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 |
| 03  |   | 02  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

345.00

Transaction ID : SB17.I18419

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

1035.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. HOOVER PRINT COMPANY**

Mailing Address 3413 SIERRA DR.

City  
BIRMINGHAMState  
ALZip Code  
35216-5505Purpose of Disbursement  
PRINTING

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 |
| 02  |   | 19  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

270.00

Transaction ID : SB17.I18410

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INFOMEDIA**

Mailing Address 2717 3RD AVENUE SOUTH

City  
BIRMINGHAMState  
ALZip Code  
35233-2705Purpose of Disbursement  
WEB HOSTING

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 |
| 02  |   | 17  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

195.00

Transaction ID : SB17.I18399

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INFOMEDIA**

Mailing Address 2717 3RD AVENUE SOUTH

City  
BIRMINGHAMState  
ALZip Code  
35233-2705Purpose of Disbursement  
WEB HOSTING

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 |
| 03  |   | 03  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

195.00

Transaction ID : SB17.I19443

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

660.00

**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 PageFOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. METRO MINI STORAGE**

Mailing Address 100 METRO PKWY

City  
PELHAMState  
ALZip Code  
35124-1171Purpose of Disbursement  
STORAGE UNIT RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 26  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

238.00

Transaction ID : SB17.I18374

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. METRO MINI STORAGE**

Mailing Address 100 METRO PKWY

City  
PELHAMState  
ALZip Code  
35124-1171Purpose of Disbursement  
STORAGE UNIT RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 24  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

238.00

Transaction ID : SB17.I18411

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. METRO MINI STORAGE**

Mailing Address 100 METRO PKWY

City  
PELHAMState  
ALZip Code  
35124-1171Purpose of Disbursement  
STORAGE UNIT RENTAL

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 19  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

238.00

Transaction ID : SB17.I19460

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

714.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 61

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. MID ALABAMA REPUBLICAN CLUB**Mailing Address 600 VESTAVIA PKWY  
STE 261City  
VESTAVIAState  
ALZip Code  
35216-7711Purpose of Disbursement  
SPONSORSHIP

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 4 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I18381

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PROFESSIONAL DATA SERVICES**Mailing Address 824 S. MILLEDGE AVE  
STE 101City  
ATHENSState  
GAZip Code  
30605-1332Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 2 | 6 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2034.00

Transaction ID : SB17.I18372

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES**Mailing Address 824 S. MILLEDGE AVE  
STE 101City  
ATHENSState  
GAZip Code  
30605-1332Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2073.73

Transaction ID : SB17.I18416

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

4607.73

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. SHEPHERD ADVISORS, LLC**

Mailing Address 18 OLMSTED ST

City  
BIRMINGHAMState  
ALZip Code  
35242Purpose of Disbursement  
ACCOUNTING SERVICES

Candidate Name

Office Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 04  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1415.00

Transaction ID : SB17.I18382

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TEMPO MEDIA LLC**

Mailing Address 2717 3RD AVENUE SOUTH

City  
BIRMINGHAMState  
ALZip Code  
35233-2705Purpose of Disbursement  
WEBSITE CONSULTING

Candidate Name

Office Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 13  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB17.I18370

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TEMPO MEDIA LLC**

Mailing Address 2717 3RD AVENUE SOUTH

City  
BIRMINGHAMState  
ALZip Code  
35233-2705Purpose of Disbursement  
WEBSITE CONSULTING

Candidate Name

Office Sought: 

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 04  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB17.I18393

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

8415.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 61

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. THE CONGRESSIONAL CLUB MUSEUM & FOUNDATION**

Mailing Address 2001 HAMPSHIRE AVE, NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 27  |   | 2026    |

City  
WASHINGTONState  
DCZip Code  
20009

FEC Identification Number

C

Purpose of Disbursement  
MEMBERSHIP DUES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.I18391

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For:

|                                            |                                  |
|--------------------------------------------|----------------------------------|
| <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**B. THE ELEVATED GROUP**Mailing Address 410 1ST STREET, SE  
STE. 310

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 24  |   | 2026    |

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

7345.00

Transaction ID : SB17.I18404

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For:

|                                            |                                  |
|--------------------------------------------|----------------------------------|
| <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                  |

State:

District:

Full Name (Last, First, Middle Initial)

**C. THE ELEVATED GROUP**Mailing Address 410 1ST STREET, SE  
STE. 310

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 16  |   | 2026    |

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

798.65

Transaction ID : SB17.I19446

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For:

|                                            |                                  |
|--------------------------------------------|----------------------------------|
| <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                  |

State:

District:

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

8393.65

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 61

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. THE LOLLAR GROUP**Mailing Address 800 CORPORATE PKWY  
STE 100City  
BIRMINGHAMState  
ALZip Code  
35242-5470Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 05  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

7000.00

Transaction ID : SB17.I18366

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE LOLLAR GROUP**Mailing Address 800 CORPORATE PKWY  
STE 100City  
BIRMINGHAMState  
ALZip Code  
35242-5470Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 05  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

9520.00

Transaction ID : SB17.I18394

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE LOLLAR GROUP**Mailing Address 800 CORPORATE PKWY  
STE 100City  
BIRMINGHAMState  
ALZip Code  
35242-5470Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 09  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

7000.00

Transaction ID : SB17.I19427

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

23520.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. THE LOLLAR GROUP**Mailing Address 800 CORPORATE PKWY  
STE 100City  
BIRMINGHAMState  
ALZip Code  
35242-5470Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

7000.00

Transaction ID : SB17.I19461

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-7147Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

623.40

Transaction ID : SB17.I19472

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 475 LENFANT PLZ SW

City  
WASHINGTONState  
DCZip Code  
20260-0004Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 18  |   | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

78.00

Transaction ID : SB17.I18413

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

7701.40

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. WELDEN HOGAN STRATEGIES**

Mailing Address 1807 WINNSBORO ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-1742Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  | / | 05  | / | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.I18395

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WELDEN HOGAN STRATEGIES**

Mailing Address 1807 WINNSBORO ROAD

City  
BIRMINGHAMState  
ALZip Code  
35213-1742Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  | / | 11  | / | 2026    |

FEC Identification Number

C

Amount of Each Disbursement this Period

5500.00

Transaction ID : SB17.I19431

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  | / | 11  | / | 2026    |

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

19.70

Transaction ID : SB17.I18363

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

10519.70

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 61

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CC TRANSACTION 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 | 2 |   | 0 | 9 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

19.70

Transaction ID : SB17.I18396

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CC TRANSACTION 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 | 3 |   | 0 | 2 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

512.20

Transaction ID : SB17.I18418

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CC TRANSACTION 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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

19.70

Transaction ID : SB17.I19454

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

551.60

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 61

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="checked" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                           | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

59.10

Transaction ID : SB17.I19465

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALABAMA REPUBLICAN PARTY**

Mailing Address 3505 LORNA ROAD

City  
HOOVERState  
ALZip Code  
35216Purpose of Disbursement  
QUALIFYING DUES

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3480.00

Transaction ID : SB17.I18358

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AUTAUGA COUNTY REPUBLICAN COMMITTEE**

Mailing Address 3505 LORNA ROAD

City  
BIRMINGHAMState  
ALZip Code  
35216Purpose of Disbursement  
SPONSORSHIP

Candidate Name

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 4 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I19453

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

4539.10

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

100173.37

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

PAGE 59 OF 61

|                                         |                              |                              |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> 17             | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input checked="" type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. ALDAG, EDWARD, , ,**

Mailing Address 3171 OVERHILL ROAD

City  
BIRMINGHAMState  
ALZip Code  
35223-1247Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7000.00

Transaction ID : SB20A.I19477

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUNTHPOINT BANK**

Mailing Address 3501 GRANDVIEW PARKWAY

City  
BIRMINGHAMState  
ALZip Code  
35243-1930Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB20A.I19476

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE QUALITY SHOPPE LLC**

Mailing Address PO BOX 42

City  
JACKSONVILLEState  
FLZip Code  
32259Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 2 | 6 |   | 2 | 0 | 2 | 6 |

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : SB20A.I19478

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

8200.00

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

8200.00

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

PAGE 60 OF 61

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. ELECTGABEEVANS.COM**

Mailing Address PO BOX 350608

City  
WESTMINSTERState  
COZip Code  
80035Purpose of Disbursement  
CONTRIBUTION

Candidate Name

EVANS, TIMOTHY, GABRIEL JOSEPH, ,

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO

District: 08

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | / | 3 | 0 | / | 2 | 0 | 2 | 6 |

FEC Identification Number

C C00849844

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.I18386

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KEAN FOR CONGRESS INC**

Mailing Address PO BOX 999

City  
EDISONState  
NJZip Code  
08818Purpose of Disbursement  
CONTRIBUTION

Candidate Name

KEAN, THOMAS, H., , JR.

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ

District: 07

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | / | 3 | 0 | / | 2 | 0 | 2 | 6 |

FEC Identification Number

C C00703058

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.I18385

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MILLER-MEEKS FOR CONGRESS**

Mailing Address PO BOX 33

City  
OTTUMWAState  
IAZip Code  
52501Purpose of Disbursement  
CONTRIBUTION

Candidate Name

MILLER-MEEKS, MARIANNETTE, JANE, ,

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA

District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 | / | 3 | 0 | / | 2 | 0 | 2 | 6 |

FEC Identification Number

C C00558825

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.I18383

☐ 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 DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 61

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input type="checkbox"/> 17  | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b           |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input checked="" type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Gary Palmer for Congress

Full Name (Last, First, Middle Initial)

**A. MILLER-MEEKS FOR CONGRESS**

Mailing Address PO BOX 33

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 30  |   | 2026    |

City  
OTTUMWAState  
IAZip Code  
52501

FEC Identification Number

|   |           |
|---|-----------|
| C | C00558825 |
|---|-----------|

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

MILLER-MEEKS, MARIANNETTE, JANE, ,

Category/  
Type

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Office Sought:

|                                           |
|-------------------------------------------|
| <input checked="" type="checkbox"/> House |
| <input type="checkbox"/> Senate           |
| <input type="checkbox"/> President        |

Disbursement For: 2026

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

Transaction ID : SB21.I18384

☐ Memo Item

State: IA

District: 02

Full Name (Last, First, Middle Initial)

**B. NRCC**

Mailing Address 320 FIRST STREET SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 15  |   | 2026    |

City  
WASHINGTONState  
DCZip Code  
20003-1838

FEC Identification Number

|   |           |
|---|-----------|
| C | C00075820 |
|---|-----------|

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

|          |
|----------|
| 15000.00 |
|----------|

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) ▼ |                                  |

Transaction ID : SB21.I19444

☐ Memo Item

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

|  |
|--|
|  |
|--|

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) ▼ |                                  |

☐ Memo Item

State:

District:

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

|          |
|----------|
| 16000.00 |
|----------|

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

|          |
|----------|
| 21000.00 |
|----------|