

**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

CAREY FOR CONGRESS

ADDRESS (number and street)

PO BOX 16032

Check if different  
than previously  
reported. (ACC)

COLUMBUS

OH

43216

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00779603

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

OH

15

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
07 / 01 / 2023

through

M M / D D / Y Y Y Y  
09 / 30 / 2023

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  
10 / 13 / 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

CAREY FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2023

To:

MM / DD / YYYY  
09 / 30 / 2023

|                                                                                                                  | 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)) ....                                             | 243203.00               | 805503.66                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 9400.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 243203.00               | 796103.66                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 104026.57               | 390480.38                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 2053.61                 | 11128.17                           |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 101972.96               | 379352.21                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 541525.87               |                                    |
| 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

CAREY FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2023

To:

MM / DD / YYYY  
09 / 30 / 2023**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).....

82637.00

250472.00

(ii) Unitemized .....

10316.00

34136.76

(iii) TOTAL of contributions  
from individuals ▶

92953.00

284608.76

(b) Political Party Committees.....

0.00

0.00

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

150250.00

520894.90

(d) The Candidate .....

0.00

0.00

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

243203.00

805503.66

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

0.00

101427.21

## 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.) .....

2053.61

11128.17

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)..... ▶

245256.61

918059.04

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

**II. DISBURSEMENTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

104026.57

390480.38

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans .....

0.00

0.00

(c) TOTAL LOAN REPAYMENTS  
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees .....

0.00

8400.00

(b) Political Party Committees.....

0.00

0.00

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

0.00

1000.00

(d) TOTAL CONTRIBUTION REFUNDS  
(add Lines 20(a), (b), and (c)).....

0.00

9400.00

21. OTHER DISBURSEMENTS .....

1330.00

165317.53

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

105356.57

565197.91

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

401625.83

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

245256.61

25. SUBTOTAL (add Line 23 and Line 24).....

646882.44

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

105356.57

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

541525.87

**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 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AITKEN, MARK, , ,

**A.**

Mailing Address 1330 DASHER LN

City

RESTON

State

VA

Zip Code

20190-3940

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SHEIN TECHNOLOGY, LLC

Occupation

VP, US PUBLIC AFFAIRS

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 10 2023

Transaction ID : AFEE180AE07040D8B3F

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH 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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 10 2023

Transaction ID : A4067CECD43E841A68C3

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

BAGAN, JOSEPH, W., ,

Mailing Address 4650 KINGSTON CT

City

COLUMBUS

State

OH

Zip Code

43220-2830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STAQ PHARMA

Occupation

CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 14 2023

Transaction ID : A35F8449ED17B4153A22

Amount of Each Receipt this Period

2000.00

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

2500.00

**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 6 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BEER, MICHAEL, , ,

**A.**

Mailing Address 2411 CULPEPER RD

City

ALEXANDRIA

State

VA

Zip Code

22308-2132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALIGNMENT GOVERNMENT STRATEGIES

Occupation

GOVT. AFFAIRS

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : AAB3177360157487D844

Amount of Each Receipt this Period

500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

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

Transaction ID : AD968CB78F3814CBFB03

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BELER, SAMUEL, K, ,

**C.**

Mailing Address 1672 FOOTHILL PARK CIR

City

LAFAYETTE

State

CA

Zip Code

94549-2245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : AD82859614DA94D39B8D

Amount of Each Receipt this Period

100.00



Memo Item

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

600.00

**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 7 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BHATIA, KARAN, , ,

**A.**

Mailing Address 6817 CAPRI PL

City

BETHESDA

State

MD

Zip Code

20817-4209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GOOGLE

Occupation

VP, GOVT AFFAIRS

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A9291CE4FFF474D07AC0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A69670D1F4E9F4DCC930

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BYERS, MINTON, &amp; ASSOCIATES LLC

**C.**

Mailing Address 88 E BROAD ST

City

COLUMBUS

State

OH

Zip Code

43215-3506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A3A63F3D2E0CC4BBAA92

Amount of Each Receipt this Period

3300.00

☐ Memo Item

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS

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

4300.00

**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 8 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BYERS, WILLIAM, L., , IV

**A.**

Mailing Address 4872 GABLES XING

City

LEWIS CENTER

State

OH

Zip Code

43035-6134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BYERS, MINTON, &amp; ASSOCIATES LLC

Occupation

OWNER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 07 2023

Transaction ID : A78EE5655AD964E9286F

Amount of Each Receipt this Period

1650.00

☒ Memo ItemPARTNERSHIP: BYERS, MINTON, & ASSOCIATES  
LLC**B.**

Full Name (Last, First, Middle Initial)

MINTON, ANDREW, T., ,

Mailing Address 107 S HIGH ST

STE 450

City

COLUMBUS

State

OH

Zip Code

43215-3492

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BYERS, MINTON &amp; ASSOCIATES, LLC

Occupation

CONSULTANT

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 07 2023

Transaction ID : A1C135B2DFA8243E7BB9

Amount of Each Receipt this Period

1650.00

☒ Memo ItemPARTNERSHIP: BYERS, MINTON, & ASSOCIATES  
LLC**C.**

Full Name (Last, First, Middle Initial)

CALABRESE, MICHAEL, D., ,

Mailing Address 2723 RENSSELAER ST

City

SPRINGFIELD

State

OH

Zip Code

45503-1234

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OIC OF CLARK CO.

Occupation

PRESIDENT

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 05 2023

Transaction ID : AD2114EB4058E4E409E9

Amount of Each Receipt this Period

250.00

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

250.00

**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 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CAREY, SUSAN, E., ,

**A.**

Mailing Address 111 DOVER RD

City

SPRINGFIELD

State

OH

Zip Code

45504-1102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPRINGFIELD FOUNDATION

Occupation

EXECUTIVE DIRECTOR

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 0 | 5 |  | 2 | 0 | 2 | 3 |

Transaction ID : AB9ABA148C52C4FFCB06

Amount of Each Receipt this Period

250.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

CHIMENTO, PATRICK, J., ,

Mailing Address 89 BEXLEY AVE

City

SPRINGFIELD

State

OH

Zip Code

45503-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A074CC05241504AEABE9

Amount of Each Receipt this Period

250.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

CLAIBORNE, WALTER, H., , III

Mailing Address 14217 CLAIBORNE RD

City

BATCHELOR

State

LA

Zip Code

70715-3514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

775.00

Date of Receipt

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

Transaction ID : A6CC20956C5EE4568BCE

Amount of Each Receipt this Period

200.00



Memo Item

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

700.00

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

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

PAGE 10 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CONRAD, JOHN, J., ,

**A.**

Mailing Address 2013 PEARCE CIR

City  
SALEMState  
OHZip Code  
44460-1884FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 14 2023

Transaction ID : AA01203F49E3C42EFB95

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CONRAD, JOHN, J., ,

Mailing Address 2013 PEARCE CIR

City  
SALEMState  
OHZip Code  
44460-1884FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 14 2023

Transaction ID : A32CCDFABF26E484C9E6

Amount of Each Receipt this Period

400.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

COTTER, KATHLEEN, S., ,

Mailing Address 4619 MCCORD ST

City  
SPRINGFIELDState  
OHZip Code  
45503-7424FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
HOMEMAKER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 05 2023

Transaction ID : A3F5EAFF5435449919A8

Amount of Each Receipt this Period

500.00

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

1000.00

**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 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DHINGRA, SUNIL, R., ,

Mailing Address 2760 KILKENNY DR

City

SPRINGFIELD

State

OH

Zip Code

45503-1181

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REALTOR

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : ABA9386A4CC344FFFAEE

Amount of Each Receipt this Period

500.00

☐ Memo Item

A.

Full Name (Last, First, Middle Initial)

DOWNEY, SHANE, , ,

Mailing Address 929 S COLUMBUS ST

City

ALEXANDRIA

State

VA

Zip Code

22314-4208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GLOBAL BUSINESS TRAVEL ASSOCIATION

Occupation

LOBBYIST

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A4F5C048D9F0A49739DB

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH 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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7C4358CA5F6D43D9B04

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

C.

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

1000.00

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 12 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DOWNING, FREELY, G., ,

**A.**

Mailing Address 1500 EASTGATE RD

City

SPRINGFIELD

State

OH

Zip Code

45503-2428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EXPRESS EMPLOYMENT

Occupation

OWNER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 0 | 5 |   | 2 | 0 | 2 | 3 |   |

Transaction ID : A45068A3494704739848

Amount of Each Receipt this Period

750.00



Memo Item

Full Name (Last, First, Middle Initial)

EBY, MENNO, T., ,

**B.**

Mailing Address 610 MILLCROSS RD

City

LANCASTER

State

PA

Zip Code

17601-5504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

M.H. EBY INC.

Occupation

EXECUTIVE

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 0 | 5 |   | 2 | 0 | 2 | 3 |   |

Transaction ID : A122FE2A91AAE433C813

Amount of Each Receipt this Period

3300.00



Memo Item

Full Name (Last, First, Middle Initial)

FISCHER, ALEX, , ,

**C.**

Mailing Address 1475 W 3RD AVE

City

COLUMBUS

State

OH

Zip Code

43212-2867

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y |
| 0 | 8 |   |   | 0 | 1 |   | 2 | 0 | 2 | 3 |   |

Transaction ID : ACCBE23EC0C1A4F7992A

Amount of Each Receipt this Period

3300.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

7350.00

**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 13 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 07 2023

Transaction ID : A1189284872694FD3907

Amount of Each Receipt this Period

3300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**Full Name (Last, First, Middle Initial)  
FLECK, MICHAEL, F, ,Mailing Address 1066 CHELSEA AVE  
STE BCity  
NAPOLEONState  
OHZip Code  
43545-1294FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 20 2023

Transaction ID : A0F64866D2167472AA59

Amount of Each Receipt this Period

50.00

☐ Memo Item**C.**Full Name (Last, First, Middle Initial)  
FLECK, MICHAEL, F, ,Mailing Address 1066 CHELSEA AVE  
STE BCity  
NAPOLEONState  
OHZip Code  
43545-1294FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 07 2023

Transaction ID : AE8A764100993432BA2B

Amount of Each Receipt this Period

35.00

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

85.00

**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 14 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GLOVER, GEORGE, T., ,

**A.** Mailing Address 7910 LONEOAK CTCity  
CINCINNATIState  
OHZip Code  
45243-3213FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FOCUSED CAPITOL SOLUTIONS LLCOccupation  
MANAGING DIRECTOR

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : AF653F4808D95464E97D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GORDON, STEVE, , ,

**B.** Mailing Address 122 C ST NW  
STE 540City  
WASHINGTONState  
DCZip Code  
20001-2102FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOTAL SPECTRUMOccupation  
MANAGING PARTNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A2343ABD6D2F04009BB8

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

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

Transaction ID : A1454AD80B2B2453E870

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

1500.00

**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 15 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GOUGH, GORDON, M., ,

**A.** Mailing Address 7095 COVENTRY WOODS DRCity  
DUBLINState  
OHZip Code  
43017-2121FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OHIO COUNCIL OF RETAIL MERCHANTSOccupation  
PRESIDENT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 07 2023

Transaction ID : A669B9D32A653498AA83

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HEIL, DAVID, , ,

**B.** Mailing Address 126 S COLUMBUS STCity  
ARLINGTONState  
VAZip Code  
22204-1350FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OBC GROUPOccupation  
CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 03 2023

Transaction ID : AC235C78633EA4C90A8E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 07 2023

Transaction ID : AC431EF27BA18461A950

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

1500.00

**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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HENDRICKS, MARY, B. , TTEE

**A.**

Mailing Address 5301 CREEDMOOR RD

APT 305

City

RALEIGH

State

NC

Zip Code

27612-3826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : AA0602A3795014AAEB43

Amount of Each Receipt this Period

90.00



Memo Item

Full Name (Last, First, Middle Initial)

HOBSON, CAROLYN, A. ,

**B.**

Mailing Address 5001 INDIGO BAY BLVD

UNIT 202

City

ESTERO

State

FL

Zip Code

33928-7958

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A4AF1A3F5BF92415BAC4

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

HOFFMAN, TAEKO, O. ,

**C.**

Mailing Address 1122 PORTESUELLO AVE

City

SANTA BARBARA

State

CA

Zip Code

93105-4619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

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

Transaction ID : A1C8481CC0B3A48CD91B

Amount of Each Receipt this Period

70.00



Memo Item

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

1160.00

**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 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOFFMAN, TAEKO, O, ,

**A.**

Mailing Address 1122 PORTESUELLO AVE

City

SANTA BARBARA

State

CA

Zip Code

93105-4619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

340.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A537B9167973A4090BEB

Amount of Each Receipt this Period

70.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C H, ,

Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054-1621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : AD2A4CDD964254C938BC

Amount of Each Receipt this Period

50.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C H, ,

Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054-1621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A45738AA09C7148AC943

Amount of Each Receipt this Period

50.00



Memo Item

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

170.00

**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 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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HUFFMAN, BONNY, C, ,

**A.** Mailing Address PO BOX 550

City

WELLSTON

State

OH

Zip Code

45692-0550

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : A1A379D413E73443981A

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HURT, CHARLES, G, , SR

**B.** Mailing Address 7836 CHURCH ST  
STE 2

City

MILLINGTON

State

TN

Zip Code

38053-2472

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A1CE8E229D7E34214B15

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INGRAM, CULTON, , ,

**C.** Mailing Address 1705 VIA SAN MARTINO

City

PALM DESERT

State

CA

Zip Code

92260-1560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

262.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : AD50FC941482C4E51B3D

Amount of Each Receipt this Period

85.00

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

535.00

**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 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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JAMES, GARY, , ,

**A.**

Mailing Address PO BOX 1009

City

REYNOLDSBURG

State

OH

Zip Code

43068-6009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DYNALAB, INC.

Occupation

MANAGER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 28 / 2023D D / Y Y Y Y Y  
28 / 2023Y Y Y Y Y  
2023

Transaction ID : AE288FADE4E994CE6B55

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

JAVENS, CHRISTOPHER, , ,

Mailing Address 2725 LINDA MARIE DR

City

OAKTON

State

VA

Zip Code

22124-1115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPITOL TAX PARTNERS LLP

Occupation

CONSULTANT

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 28 / 2023D D / Y Y Y Y Y  
28 / 2023Y Y Y Y Y  
2023

Transaction ID : A41497598D2524062BB5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH 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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2023D D / Y Y Y Y Y  
30 / 2023Y Y Y Y Y  
2023

Transaction ID : AC521A7C78821448BAD0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

1500.00

**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 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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JOHNSON, LEONARD, E, ,

**A.** Mailing Address 7042 CREEKSIDE CIRCity  
FAIRBORNState  
OHZip Code  
45324-6164FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 27 2023

Transaction ID : A1D203923B80E426A913

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KARAM, J. DAVID, , , II

**B.** Mailing Address 2380 ONANDAGA DRCity  
COLUMBUSState  
OHZip Code  
43221-3618FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SBARRO LLC.Occupation  
EXECUTIVE

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 07 2023

Transaction ID : A332DE3C7BAC94271A81

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KEELEN, MATT, , ,

**C.** Mailing Address 1005 SYMPHONY ISLES BLVDCity  
APOLLO BEACHState  
FLZip Code  
33572-2787FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE KEELEN GROUPOccupation  
OWNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 30 2023

Transaction ID : AD8EE9AE4D7074116956

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1250.00

**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 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)

**CAREY FOR CONGRESS**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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2023

Transaction ID : AFE0055D483624155922

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
KLINE, DONALD, L., , ESQ.

Mailing Address 33 S GRANT AVE

City  
COLUMBUSState  
OHZip Code  
43215-3927FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

KLINE LAW OFFICE

ATTORNEY

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 07 2023

Transaction ID : AC6EEBF7A05FB4A409FF

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
KOHMAN, DEBORAH, A., ,

Mailing Address 10039 HOLLOW RD SW

City  
PATASKALAState  
OHZip Code  
43062-8543FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SCHAFER &amp; ASSOCIATES, INC.

CPA

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2023

Transaction ID : AF6C087C78DEF4F4BAEB

Amount of Each Receipt this Period

250.00

☐ Memo Item

750.00

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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KRIVDA, PAMELA, S., ,

**A.** Mailing Address 3451 STONEVISTA LN

City

COLUMBUS

State

OH

Zip Code

43221-4942

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KRIVDA LAW OFFICES

Occupation

ATTORNEY

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AEADF302147EC4696854

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAGOS, JAMES, H., ,

**B.** Mailing Address 5057 TROY RD

City

SPRINGFIELD

State

OH

Zip Code

45502-8150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAGOS &amp; LAGOS

Occupation

ATTORNEY

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 0 | 5 |  | 2 | 0 | 2 | 3 |

Transaction ID : A7E625E5967B34632BA0

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAGOS, MATINA, K., ,

**C.** Mailing Address 750 SHRINE RD

City

SPRINGFIELD

State

OH

Zip Code

45504-3932

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 0 | 5 |  | 2 | 0 | 2 | 3 |

Transaction ID : A66B111A00B1C4062B38

Amount of Each Receipt this Period

500.00

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

4050.00

**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 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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LAIRD, JAMES, F., ,

**A.**

Mailing Address 95 N RIVERVIEW ST

UNIT 112

City

DUBLIN

State

OH

Zip Code

43017-1176

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DIAMOND HILL

Occupation

EXECUTIVE

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : A9A8B42A686DD486095F

Amount of Each Receipt this Period

2300.00



Memo Item

Full Name (Last, First, Middle Initial)

LEMASTER, ROWLAND, D., ,

**B.**

Mailing Address PO BOX 910

City

WASHINGTON COURT H

State

OH

Zip Code

43160-0910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : AD8442248DE624C2CA4C

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

LOVERME, ROBERT, R., ,

**C.**

Mailing Address 267 SEASIDE AVE

City

MILFORD

State

CT

Zip Code

06460-4601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A73A41CDF8DA8446C80E

Amount of Each Receipt this Period

82.00



Memo Item

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

2632.00

**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 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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LUMPE RABER AND EVANS

**A.**

Mailing Address 37 WEST BROAD STREET, SUITE 1140

City

COLUMBUS

State

OH

Zip Code

43215-4132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A508DE6C3FA1A4DC0939

Amount of Each Receipt this Period

500.00

☐ Memo Item

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS

**B.**

Full Name (Last, First, Middle Initial)

RABER, DAVID, A, ,

Mailing Address 1880 WILLOW FORGE DR

City

COLUMBUS

State

OH

Zip Code

43220-4475

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

LUMPE RABER &amp; EVANS

ATTORNEY

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A6D032FCEA72044FAB96

Amount of Each Receipt this Period

250.00

☒ Memo Item

PARTNERSHIP: LUMPE RABER AND EVANS

**C.**

Full Name (Last, First, Middle Initial)

EVANS, JACOB, C, ,

Mailing Address 6716 GLASIN CT

City

DUBLIN

State

OH

Zip Code

43016-6150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

LUMPE RABER EVANS

ATTORNEY

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : AC059EB8238CC4F1AA75

Amount of Each Receipt this Period

250.00

☒ Memo Item

PARTNERSHIP: LUMPE RABER AND EVANS

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

500.00

**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 25 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MAPLE, RALPH, E, ,

**A.**

Mailing Address 3702 SUNSET BLVD

City

HOUSTON

State

TX

Zip Code

77005-2030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 04  |   | 2023        |

Transaction ID : A03F426BE75524B70B1B

Amount of Each Receipt this Period

400.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

MAPLE, RALPH, E, ,

Mailing Address 3702 SUNSET BLVD

City

HOUSTON

State

TX

Zip Code

77005-2030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 11  |   | 2023        |

Transaction ID : A4EA9037038B74F839B6

Amount of Each Receipt this Period

450.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

MCCAMON, CURT, , ,

Mailing Address 55 QUAIL RDG

City

CHAGRIN FALLS

State

OH

Zip Code

44022-3606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SUPERIOR BEVERAGE GROUP

Occupation

EXECUTIVE

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 13  |   | 2023        |

Transaction ID : AD28431571A174B9DB29

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1350.00

**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 26 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY 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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

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

Transaction ID : A44BBB175A09C4431A42

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

MCCURDY, DAVID, , ,

Mailing Address 2400 TREMONT RD

City

COLUMBUS

State

OH

Zip Code

43221-3726

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

Name of Employer

Occupation

KIMBALL MIDWEST

VICE PRESIDENT

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A38C763A859C44CFB2D

Amount of Each Receipt this Period

3300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH 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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A934E70E375DA4534A1F

Amount of Each Receipt this Period

3300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3300.00

**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 27 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MCDORMAN, MICHAEL, , ,

**A.**

Mailing Address 124 E 3RD ST

City  
SPRINGFIELDState  
OHZip Code  
45504-1453FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GREATER SPRINGFIELD PARTNERSHIPOccupation  
CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 29 2023

Transaction ID : AD8251D2FCDF2418BACD

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 04 2023

Transaction ID : ADFD2419C52384BAF9AD

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MCGREGOR, ROSS, W., ,

**C.**

Mailing Address 2915 BURRWOOD DR

City  
SPRINGFIELDState  
OHZip Code  
45503-1107FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PENTAFLEX, INC.Occupation  
EXECUTIVE VP

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 05 2023

Transaction ID : AEE1F4246F6724F3B9C4

Amount of Each Receipt this Period

2500.00

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

3000.00

**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 28 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MCMILLEN, JEFF, , ,

**A.**

Mailing Address 2001 K ST NW

City

WASHINGTON

State

DC

Zip Code

20006-1037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AKIN GUMP STRAUSS HAUSER FELD

Occupation

ATTORNEY

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AC40E08C32E8847CE8C5

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

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

Transaction ID : AE4766753E3E1457ABB9

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MILBURN, SCOTT, , ,

**C.**

Mailing Address 4254 LYON DR

City

COLUMBUS

State

OH

Zip Code

43220-4430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

30 PUBLIC RELATIONS

Occupation

CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A47275DA038084301A81

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

750.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 127

(check only one)

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A9981187A4C4944D59C5

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
MILLER, JEFFREY, , ,

Mailing Address 4723 CAT MOUNTAIN DR.

City  
AUSTINState  
TXZip Code  
78731-3507FEC ID number of contributing  
federal political committee.**C**

Name of Employer

MILLER STRATEGIES, LLC

Occupation  
CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : A93AA7A6140B8482C908

Amount of Each Receipt this Period

3300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

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

Transaction ID : AF6FCBDD8EDE04E91B50

Amount of Each Receipt this Period

3300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

3300.00

**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 30 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MILLER, MEGAN, L., ,

**A.**

Mailing Address 1533 MOOREFIELD RD

City

SPRINGFIELD

State

OH

Zip Code

45503-5742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DIRECT PRIMARY CARE

Occupation

APRN CNP

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A51F0A71574664C19AE2

Amount of Each Receipt this Period

300.00



Memo Item

Full Name (Last, First, Middle Initial)

MORIKIS, JOHN, G., ,

**B.**

Mailing Address 24300 LAKE RD

City

BAY VILLAGE

State

OH

Zip Code

44140-2957

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SHERWIN WILLIAMS

Occupation

CEO

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : AAAC5169CBD1A4AE7AE0

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

MORROW, ALLAN, L., ,

**C.**

Mailing Address 4510 W FARRINGTON RD

City

COVINGTON

State

OH

Zip Code

45318-9760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : AD6543974063B4183933

Amount of Each Receipt this Period

100.00



Memo Item

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

1400.00

**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 31 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MOTTLEY, DONALD, , ,

**A.**

Mailing Address 137 SAINT JULIEN ST

City

WORTHINGTON

State

OH

Zip Code

43085-2229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TAFT STETTINIUS HOLLISER LLP

Occupation

ATTORNEY

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 3 |   |

Transaction ID : A716D33EC7A5248CFAC8

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH 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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 3 |   |

Transaction ID : ADFB8AB98818B4C3AAF6

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

MURPHY, BARBARA, LOUISE, ,

Mailing Address 236 KINGSTON DR

City

PITTSBURGH

State

PA

Zip Code

15235-5244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 5 |   | 2 | 0 | 3 |   |

Transaction ID : A300B57CD1D5F41F4B9D

Amount of Each Receipt this Period

400.00

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

900.00

**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 32 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MURRY, EMILY, , ,

**A.**

Mailing Address 1212 NEW YORK AVE NW

STE 750

City

WASHINGTON

State

DC

Zip Code

20005-6135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TARPLIN, DOWNS YOUNG

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A6BDED2B7E6D24871B2E

Amount of Each Receipt this Period

1000.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A72EA98B313864E8A9B4

Amount of Each Receipt this Period

1000.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

PATTERSON, CHARLES, , ,

**C.**

Mailing Address 468 CARILLION DR

City

SPRINGFIELD

State

OH

Zip Code

45503-5300

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CLARK COUNTY COMBINED HEALTH DIST.

Occupation

HEALTH COMMISSIONER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A97CF20AB514645E09FC

Amount of Each Receipt this Period

500.00



Memo Item

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

1500.00

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

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

PAGE 33 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RATH, EUNICE, MARY, ,

**A.**

Mailing Address 1720 E LAWN DR

City

SAVANNA

State

IL

Zip Code

61074-1810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A834D74AFCE0D4D3AA3F

Amount of Each Receipt this Period

100.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

REINHARD, DONALD, G, ,

Mailing Address 75 HARVARD AVE

City

PALMERTON

State

PA

Zip Code

18071-1212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENCOR

Occupation

EXECUTIVE

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A1F3ED333C3DF4D78812

Amount of Each Receipt this Period

300.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

ROBERTS, DAVID, E, , MD

Mailing Address 5584 S STATE ROUTE 72

City

SABINA

State

OH

Zip Code

45169-9425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A4F33A1BFD1BD4AA28EB

Amount of Each Receipt this Period

250.00



Memo Item

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

650.00

**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 34 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ROE, KATHY, , ,

**A.**

Mailing Address PO BOX 363

City

BETHESDA

State

OH

Zip Code

43719-0363

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACNR INC.

Occupation

ASST. TREASURY MGR.

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : AFE6ACD4FE6DE4415855

Amount of Each Receipt this Period

200.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A09834D5D858343C5A9C

Amount of Each Receipt this Period

200.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ROSENBERGER, LAURA, , ,

**C.**

Mailing Address 7449 N RIVER RD

City

SPRINGFIELD

State

OH

Zip Code

45502-9448

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A345FB4082F6142848D2

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

450.00

**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 35 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
WINRED**A.**

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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 3 |   |

Transaction ID : A4DDF1225CD8145C3AC4

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
ROYER, JOHN, W., ,**B.**

Mailing Address 1480 DUBLIN RD

City  
COLUMBUSState  
OHZip Code  
43215-1010FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

KOHRO ROYER GRIFFITH

PRESIDENT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 3 |   |

Transaction ID : AB0DBDEA758D0486688A

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
SCHAEFER, ROGER, J., ,**C.**

Mailing Address 2233 TREEMONT CT S

City  
SALEMState  
ORZip Code  
97302-9432FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 0 |   | 2 | 0 | 3 |   |

Transaction ID : A4D620BF4ABFA4CE2892

Amount of Each Receipt this Period

100.00

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

600.00

**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 36 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHWARZMAN, CHRISTINE, , ,

**A.**

Mailing Address 740 PARK AVE

City

NEW YORK

State

NY

Zip Code

10021-4251

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A0D40278A32F2442D917

Amount of Each Receipt this Period

- 3300.00



Memo Item

REDESIGNATION FROM

**B.**

Full Name (Last, First, Middle Initial)

SCHWARZMAN, CHRISTINE, , ,

Mailing Address 740 PARK AVE

City

NEW YORK

State

NY

Zip Code

10021-4251

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : ACC92C90DBB304C17B9F

Amount of Each Receipt this Period

3300.00



Memo Item

REDESIGNATION TO

**C.**

Full Name (Last, First, Middle Initial)

SCHWARZMAN, CHRISTINE, , ,

Mailing Address 740 PARK AVE

City

NEW YORK

State

NY

Zip Code

10021-4251

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : AB5776989AFC34166A99

Amount of Each Receipt this Period

6600.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

6600.00

**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 37 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

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

Transaction ID : A1F04567013DD421AB8D

Amount of Each Receipt this Period

6600.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
SCHWARZMAN, STEPHEN, , ,

Mailing Address 345 PARK AVE

City  
NEW YORKState  
NYZip Code  
10154-0004FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

BLACKSTONE

CEO AND CHAIRMAN

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : AC9D282AF98E14C7FBD8

Amount of Each Receipt this Period

- 3300.00

☒ Memo Item

REDESIGNATION FROM

Full Name (Last, First, Middle Initial)  
SCHWARZMAN, STEPHEN, , ,

Mailing Address 345 PARK AVE

City  
NEW YORKState  
NYZip Code  
10154-0004FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

BLACKSTONE

CEO AND CHAIRMAN

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A8D20023976C145DF810

Amount of Each Receipt this Period

3300.00

☒ Memo Item

REDESIGNATION TO

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

0.00

**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 38 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHWARZMAN, STEPHEN, , ,

**A.**

Mailing Address 345 PARK AVE

City

NEW YORK

State

NY

Zip Code

10154-0004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLACKSTONE

Occupation

CEO AND CHAIRMAN

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A743D27BA35944ADD9DA

Amount of Each Receipt this Period

6600.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH 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: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

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

Transaction ID : AA6E3BAC9F47141E1884

Amount of Each Receipt this Period

6600.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

SHUMATE, M., RENEE, ,

Mailing Address 553 GAYLE DR

City

COLUMBUS

State

OH

Zip Code

43230-2886

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN ELECTRIC POWER

Occupation

EXTERNAL AFFAIRS MANAGER

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : ACE4168C268D947CBA46

Amount of Each Receipt this Period

500.00



Memo Item

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

7100.00

**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 39 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SMITH, DANIEL, , ,

**A.**

Mailing Address 7 WOODBINE ROAD

City

FLORHAM PARK

State

NJ

Zip Code

07932

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

Transaction ID : A4F9C09AD507349C8881

Amount of Each Receipt this Period

25.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH 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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : AC59D8A4A92D84E27AE5

Amount of Each Receipt this Period

25.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

SMITH, DANIEL, , ,

Mailing Address 7 WOODBINE ROAD

City

FLORHAM PARK

State

NJ

Zip Code

07932

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A194AB9D5245E45389F9

Amount of Each Receipt this Period

25.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

50.00

**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 40 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 11 2023

Transaction ID : AD2008F4704204BB69EF

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
SOLL, BRUCE, , ,

Mailing Address 141 S DREXEL AVE

City  
COLUMBUSState  
OHZip Code  
43209-1739FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
COUNSELOR

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 31 2023

Transaction ID : AB0EAE2E258C74CCCAE4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 07 2023

Transaction ID : A125A7EB939D44735A68

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

1000.00

**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 41 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SOLL, BRUCE, , ,

**A.**

Mailing Address 141 S DREXEL AVE

City

COLUMBUS

State

OH

Zip Code

43209-1739

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOLL ADVISORS LLC

Occupation

COUNSELOR

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : ABC6D971B896243018F7

Amount of Each Receipt this Period

1000.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH 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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A6E296E464BD345F0B46

Amount of Each Receipt this Period

1000.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

STRILECKYJ LAW OFFICE, LLC

Mailing Address 8 N LIMESTONE ST  
STE B

City

SPRINGFIELD

State

OH

Zip Code

45502-1132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A05B87DCF84DE4BC2B6B

Amount of Each Receipt this Period

250.00



Memo Item

PENDING VERIFICATION AS FEDERALLY  
PERMISSIBLE FUNDS**SUBTOTAL** of Receipts This Page (optional)..... ▶

1250.00

**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 42 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STRUNK, JEFFREY, , ,

**A.**

Mailing Address 3206 WINNETT RD

City

CHEVY CHASE

State

MD

Zip Code

20815-3204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FORBES TATE PARTNERS

Occupation

FORBES TATE PARTNERS

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : AB9D14451E6C84BB8A32

Amount of Each Receipt this Period

2500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A4B5E76DC6A7A44D082E

Amount of Each Receipt this Period

2500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

TRIOLO, JACOB, , ,

**C.**Mailing Address 333 A ST NE  
STE 675E

City

WASHINGTON

State

DC

Zip Code

20002-5910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPITOL TAX PARTNERS LLP

Occupation

ATTORNEY

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A1CC0E6C49D794C70BDE

Amount of Each Receipt this Period

2500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

5000.00

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

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

PAGE 43 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
WINRED**A.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

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

Transaction ID : AB980090C786B43C7A31

Amount of Each Receipt this Period

2500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)  
VALERIUS, JOHN, B, ,

Mailing Address 1909 CANTERBURY ST

City  
IRVINGState  
TXZip Code  
75062-3551FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A60FD4494BF704D6CA19

Amount of Each Receipt this Period

35.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
WALKER, KIRT, A., ,Mailing Address 250 W SPRING ST  
APT 1212City  
COLUMBUSState  
OHZip Code  
43215-2586FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

NATIONWIDE

CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A3466ABF859184992BBE

Amount of Each Receipt this Period

3300.00

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

3335.00

**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 44 OF 127

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WALTHER, LEONIE, M, ,

**A.** Mailing Address 15006 SW 127TH CIRCLE PL NCity  
MIAMIState  
FLZip Code  
33186-6344FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 21 2023

Transaction ID : A9383A672ED39429DB19

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WEXNER, ABIGAIL, S., ,

**B.** Mailing Address KITZMILLER RDCity  
NEW ALBANYState  
OHZip Code  
43054FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
PHILANTHROPIST

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 14 2023

Transaction ID : A428BE1C30E5F49D0BAA

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WEXNER, LESLIE, H., ,

**C.** Mailing Address KITZMILLER RD.City  
NEW ALBANYState  
OHZip Code  
43054FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
PHILANTHROPIST

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 07 2023

Transaction ID : AD5E423D2B87C44ECA52

Amount of Each Receipt this Period

3300.00

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

6700.00

**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 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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WOOD, ROBERT, , ,

**A.**

Mailing Address 7952 SPRING MILL DR

City

CANAL WINCHESTER

State

OH

Zip Code

43110-9264

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 11  |   | 2023        |

Transaction ID : A4D210588ABBC4DEB97E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

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: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157533.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 21  |   | 2023        |

Transaction ID : A4F7D10CED6DE46DA82D

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ZUK, ALICE, N, ,

**C.**Mailing Address 9333 N CHURCH DR  
APT 411

City

CLEVELAND

State

OH

Zip Code

44130-4718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 07  |   | 2023        |

Transaction ID : AC9F10757BFD64D7DB90

Amount of Each Receipt this Period

70.00

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

1070.00

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

82637.00

**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)

**CAREY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
AES CORPORATION PAC; THEMailing Address 4300 WILSON BLVD  
FL 11City  
ARLINGTONState  
VAZip Code  
22203-4167FEC ID number of contributing  
federal political committee.**C** C00507962

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 11  |   | 2023        |

Transaction ID : AB6B05FB9F7C54D98AFF

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
AKIN GUMP STRAUSS HAUER & FELD LLP CIVIC ACTION COMMITTEE (AKA AKIN GUMP PAC)

Mailing Address 2001 K ST NW

City  
WASHINGTONState  
DCZip Code  
20006-1037FEC ID number of contributing  
federal political committee.**C** C00104901

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 14  |   | 2023        |

Transaction ID : A5241DC1C71F64A80976

Amount of Each Receipt this Period

750.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF FAMILY PHYSICIANS PACMailing Address 1133 CONNECTICUT AVE NW  
STE 1100City  
WASHINGTONState  
DCZip Code  
20036-4342FEC ID number of contributing  
federal political committee.**C** C00411553

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 05  |   | 2023        |

Transaction ID : A5219C800E8E841339B6

Amount of Each Receipt this Period

1000.00

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

2750.00

**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 |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)

**A.**

Mailing Address 655 BEACH ST

City

SAN FRANCISCO

State

CA

Zip Code

94109-1342

FEC ID number of contributing  
federal political committee.**C** C00196246

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A2703BFB667F843AE96A

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF PHYSICIAN ASSOCIATES PAC (PA PAC)

Mailing Address 2318 MILL RD  
STE 1300

City

ALEXANDRIA

State

VA

Zip Code

22314-6868

FEC ID number of contributing  
federal political committee.**C** C00122499

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A8B3191E1EDF941D7963

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 10275 W. HIGGINS RD  
SUITE 500 - C/O FINANCE DEPARTMENT

City

ROSEMENT

State

IL

Zip Code

60018

FEC ID number of contributing  
federal political committee.**C** C00173153

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : ACAEA98E378214E31AA0

Amount of Each Receipt this Period

2500.00

☐ Memo Item**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  
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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

Mailing Address 1333 NEW HAMPSHIRE AVE NW

STE 700

City

WASHINGTON

State

DC

Zip Code

20036-1532

FEC ID number of contributing  
federal political committee.**C** C00004275

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2023        |

Transaction ID : A7CC330A1C9EA4042B9B

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN CAR RENTAL ASSOCIATION PAC**

Mailing Address PO BOX 584

City

LONG LAKE

State

NY

Zip Code

12847-0584

FEC ID number of contributing  
federal political committee.**C** C00612010

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 28  |   | 2023        |

Transaction ID : AB15B2FA46F7648B9B50

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN CHEMISTRY COUNCIL PAC**

Mailing Address 700 2ND ST NE

ATTN: ALLISON STARMANN

City

WASHINGTON

State

DC

Zip Code

20002-8100

FEC ID number of contributing  
federal political committee.**C** C00252338

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 26  |   | 2023        |

Transaction ID : AEA0AA1C926064B828EC

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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  
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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN COLLEGE OF CARDIOLOGY PAC (HEARTPAC)****A.**

Mailing Address 2400 N ST NW

City

WASHINGTON

State

DC

Zip Code

20037-1153

FEC ID number of contributing  
federal political committee.**C** C00375360

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A36D4BC7D9BF34557B12

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)****B.**Mailing Address 1400 L STREET, NW  
SUITE 400

City

WASHINGTON

State

DC

Zip Code

20005-3592

FEC ID number of contributing  
federal political committee.**C** C00010868

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A86005C1561354228BF1

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF LIFE INSURERS PAC****C.**Mailing Address 101 CONSTITUTION AVE NW  
STE 700

City

WASHINGTON

State

DC

Zip Code

20001-2133

FEC ID number of contributing  
federal political committee.**C** C00147066

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A6FC9ED01D9A641AA961

Amount of Each Receipt this Period

3000.00

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

7000.00

**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 |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN FINANCIAL SERVICES ASSOCIATION PAC

**A.**

Mailing Address 919 18TH ST NW

STE 300

City

WASHINGTON

State

DC

Zip Code

20006-5531

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

C00038604

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : ACB8CABF3ED65475FAC1

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN FUELS AND PETROCHEMICAL MANUFACTURERS ASSOCIATION PAC (AFPMPAC)

**B.**

Mailing Address 1800 M ST NW

STE 900

City

WASHINGTON

State

DC

Zip Code

20036-5802

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

C00415026

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A082E1AB567B048A0836

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC

**C.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2604

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

C00797670

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A944DB3B5B4C44ADC93E

Amount of Each Receipt this Period

5000.00



Memo Item

**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  
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 |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN PODIATRIC MEDICAL ASSOCIATION PAC

A.

Mailing Address 9312 OLD GEORGETOWN RD

City

BETHESDA

State

MD

Zip Code

20814-1621

FEC ID number of contributing  
federal political committee.

C

C00008839

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A8BCA5D82B5964A2BBE5

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC (ASA PAC)

B.

Mailing Address 1061 AMERICAN LN

City

SCHAUMBURG

State

IL

Zip Code

60173-4973

FEC ID number of contributing  
federal political committee.

C

C00255752

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A6F5E17A411974638921

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN VETERINARY MEDICAL ASSOCIATION PAC

C.

Mailing Address 1910 SUNDERLAND PL NW

City

WASHINGTON

State

DC

Zip Code

20036-1608

FEC ID number of contributing  
federal political committee.

C

C00114132

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AD36871FC90DB4238901

Amount of Each Receipt this Period

1000.00



Memo Item

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

3000.00

**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 |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN WATERWAYS OPERATORS-PAC**

Mailing Address 801 N QUINCY ST

STE 200

City

ARLINGTON

State

VA

Zip Code

22203-1708

FEC ID number of contributing  
federal political committee.**C** C00034678

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A2DDF9BD2226443CBDD

Amount of Each Receipt this Period

1000.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

**AMGEN INC. PAC**

Mailing Address 601 13TH ST NW

STE 1100

City

WASHINGTON

State

DC

Zip Code

20005-3822

FEC ID number of contributing  
federal political committee.**C** C00251876

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A2059FE65EB264E77ACC

Amount of Each Receipt this Period

1000.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

**ANHEUSER-BUSCH COMPANIES LLC PAC**

Mailing Address ONE BUSCH PLACE 202-7

City

ST. LOUIS

State

MO

Zip Code

63118-1852

FEC ID number of contributing  
federal political committee.**C** C00034488

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A0F8ADAE8C93F483E935

Amount of Each Receipt this Period

1000.00



Memo Item

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

3000.00

**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 |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ASURION LLC PAC (ASURION PAC)

Mailing Address 140 11TH AVE N

City  
NASHVILLEState  
TNZip Code  
37203-6353FEC ID number of contributing  
federal political committee.

C C00450916

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 25 2023

Transaction ID : A90A478E2825E49E8968

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Mailing Address 1625 PRINCE ST  
STE 225City  
ALEXANDRIAState  
VAZip Code  
22314-2889FEC ID number of contributing  
federal political committee.

C C00250399

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 31 2023

Transaction ID : A304FE011E6764259975

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CAPITOL PARTNERS PAC

Mailing Address 88 EAST BROAD STREET SUITE 1560

City  
COLUMBUSState  
OHZip Code  
43215FEC ID number of contributing  
federal political committee.

C C00633735

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 20 2023

Transaction ID : A602DE4EE20354E259C9

Amount of Each Receipt this Period

1500.00

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

8000.00

**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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CAP-PAC SEPARATE SEGREGATED FUND OF THE NATIONAL COMMUNITY ACTION FOUNDATION INC

**A.**

Mailing Address 1 MASSACHUSETTS AVE NW

STE 310

City

WASHINGTON

State

DC

Zip Code

20001-1420

FEC ID number of contributing  
federal political committee.**C** C00163048

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 19  |   | 2023        |

Transaction ID : ADA176B5D37294A6099F

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CATERPILLAR INC. PAC (CATPAC)

Mailing Address 5205 N. O'CONNOR BOULEVARD

SUITE 100

City

IRVING

State

TX

Zip Code

75039

FEC ID number of contributing  
federal political committee.**C** C00148031

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 12  |   | 2023        |

Transaction ID : A0D1137B65E164FB2A50

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

CBOE GLOBAL MARKETS, INC. PAC (CBOE PAC)

Mailing Address 433 W VAN BUREN ST

City

CHICAGO

State

IL

Zip Code

60607-0433

FEC ID number of contributing  
federal political committee.**C** C00100693

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2023        |

Transaction ID : AFAEAD37DE0A6456C86E

Amount of Each Receipt this Period

1500.00

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

5000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary 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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COMCAST CORPORATION & NBCUNIVERSAL PAC - FEDERAL**

Mailing Address 1701 JOHN F KENNEDY BLVD

FL 49

City

PHILADELPHIA

State

PA

Zip Code

19103-2855

FEC ID number of contributing  
federal political committee.**C** C00248716

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A5A5D0D93F71143F4BAA

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

**COVINGTON AND BURLING LLP PAC**

Mailing Address ONE CITYCENTER

850 TENTH STREET, NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00462630

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : AA8EBBA4F36574F21881

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

**CRH AMERICAS, INC. PAC**

Mailing Address 11714 WILSON PARKE AVE

STE 155

City

AUSTIN

State

TX

Zip Code

78726

FEC ID number of contributing  
federal political committee.**C** C00346353

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : AB66034F1B7B34A2FA90

Amount of Each Receipt this Period

1000.00



Memo Item

**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  
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 |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DELL TECHNOLOGIES, INC. PAC

**A.**

Mailing Address 440 FIRST ST, NW

SUITE 820

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00369751

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A130FEA3D964F4EA881D

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

DELOITTE PAC

**B.**

Mailing Address PO BOX 365

City

WASHINGTON

State

DC

Zip Code

20044-0365

FEC ID number of contributing  
federal political committee.**C** C00211318

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

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

Transaction ID : A7750EA3CBB8B4E91925

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

DENBURY INC POLITICAL COMMITTEE

**C.**

Mailing Address 5851 LEGACY CIR

STE 1200

City

PLANO

State

TX

Zip Code

75024-5968

FEC ID number of contributing  
federal political committee.**C** C00440651

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AFEF77D7266704C14A7A

Amount of Each Receipt this Period

1000.00



Memo Item

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

4500.00

**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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DTE ENERGY COMPANY PAC

**A.**

Mailing Address ONE ENERGY PLAZA

ROOM 1505 WCB

City

DETROIT

State

MI

Zip Code

48226-1221

FEC ID number of contributing  
federal political committee.**C** C00081547

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 07  |   | 14  |   | 2023      |

Transaction ID : AC6B5AC89BBF14765998

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)

**B.**

Mailing Address 1001 PENNSYLVANIA AVE NW

STE 710

City

WASHINGTON

State

DC

Zip Code

20004-2513

FEC ID number of contributing  
federal political committee.**C** C00197228

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 07  |   | 31  |   | 2023      |

Transaction ID : A826BBF28E80840CA82E

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ENTERGY CORPORATION PAC (ENPAC)

**C.**

Mailing Address 425 W CAPITOL AVE

STE 24B

City

LITTLE ROCK

State

AR

Zip Code

72201-3405

FEC ID number of contributing  
federal political committee.**C** C00363879

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 07  |   | 11  |   | 2023      |

Transaction ID : ACFE04CB2CB4D4487BC1

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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)

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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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FEDEX CORPORATION PAC

**A.**

Mailing Address 942 SHADY GROVE RD S

City

MEMPHIS

State

TN

Zip Code

38120-4117

FEC ID number of contributing  
federal political committee.**C** C00068692

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A34229A0D792546F4B9D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FINSECA PAC

**B.**Mailing Address 600 13TH ST NW  
STE 500

City

WASHINGTON

State

DC

Zip Code

20005-3026

FEC ID number of contributing  
federal political committee.**C** C00447565

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : AFBC137FC1FFD49E2ADB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FMR LLC PAC - FEDERAL (FIDELITY PAC)

**C.**Mailing Address 245 SUMMER ST  
# V9B

City

BOSTON

State

MA

Zip Code

02210-1133

FEC ID number of contributing  
federal political committee.**C** C00380550

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A984C971FECB9489696D

Amount of Each Receipt this Period

2500.00

☐ Memo Item**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  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 127

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (BUSINESS TRAVEL PAC)****A.**

Mailing Address 1101 KING ST

STE 500

City

ALEXANDRIA

State

VA

Zip Code

22314-2957

FEC ID number of contributing  
federal political committee.**C** C00373910

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AE781075302B04FEA928

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

**HUNTINGTON BANCSHARES INC. PAC (HBI-PAC)****B.**

Mailing Address 41 S. HIGH STREET

City

COLUMBUS

State

OH

Zip Code

43287

FEC ID number of contributing  
federal political committee.**C** C00165589

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A89E774FA93F144B0935

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

**ICE MILLER PAC****C.**

Mailing Address ONE AMERICAN SQUARE

SUITE 2900

City

INDIANAPOLIS

State

IN

Zip Code

46282-0200

FEC ID number of contributing  
federal political committee.**C** C00520973

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : AFEEE0D4ABC86406ABDF

Amount of Each Receipt this Period

1500.00



Memo Item

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

6500.00

**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 60 OF 127

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**INDEPENDENT COMMUNITY BANKERS OF AMERICA PAC****A.**

Mailing Address 1615 L ST NW

STE 900

City

WASHINGTON

State

DC

Zip Code

20036-5623

FEC ID number of contributing  
federal political committee.**C** C00032698

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 27  |   | 2023        |

Transaction ID : A824A190BBDCC4B2397C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC (INSURPAC)****B.**

Mailing Address 20 F ST NW

STE 610

City

WASHINGTON

State

DC

Zip Code

20001-6707

FEC ID number of contributing  
federal political committee.**C** C00022343

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2023        |

Transaction ID : AA7D71FB2D56040BD9F9

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**INSURED RETIREMENT INSTITUTE PAC (IRI PAC)****C.**

Mailing Address 1100 VERMONT AVE NW

FL 10

City

WASHINGTON

State

DC

Zip Code

20005-6327

FEC ID number of contributing  
federal political committee.**C** C00490474

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 07  |   | 2023        |

Transaction ID : ABAB7F3A64F814F7FABE

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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  
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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**INSURED RETIREMENT INSTITUTE PAC (IRI PAC)****A.**

Mailing Address 1100 VERMONT AVE NW

FL 10

City

WASHINGTON

State

DC

Zip Code

20005-6327

FEC ID number of contributing  
federal political committee.**C** C00490474

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2023        |

Transaction ID : A72C4BAA0AF824021977

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**INTEL CORPORATION POLITICAL ACTION COMMITTEE (IPAC)****B.**

Mailing Address 1155 F ST. NW

STE. 1025

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00125641

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 19  |   | 2023        |

Transaction ID : A0D0679B1B2EF4FFC97B

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**JPMORGAN CHASE & CO. FEDERAL PAC****C.**

Mailing Address 875 15TH ST NW

FL 9

City

WASHINGTON

State

DC

Zip Code

20005-2221

FEC ID number of contributing  
federal political committee.**C** C00104299

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 07  |   | 2023        |

Transaction ID : A39A84082F1E54A87A01

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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 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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JPMORGAN CHASE & CO. FEDERAL PAC****A.**

Mailing Address 875 15TH ST NW

FL 9

City

WASHINGTON

State

DC

Zip Code

20005-2221

FEC ID number of contributing  
federal political committee.**C** C00104299

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : AF8193729688D4056AA2

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

**KPMG PARTNERS/PRINCIPALS AND EMPLOYEES PAC****B.**

Mailing Address 1801 K ST NW

City

WASHINGTON

State

DC

Zip Code

20006-1301

FEC ID number of contributing  
federal political committee.**C** C00280222

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A809DA611824946238FB

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

**LEADERSHIP FOR ENTERPRISE AND OPPORTUNITY PAC****C.**

Mailing Address 1400 N PROVIDENCE RD

STE 1040

City

MEDIA

State

PA

Zip Code

19063-2079

FEC ID number of contributing  
federal political committee.**C** C00466870

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : AAE56E8680819494D9DF

Amount of Each Receipt this Period

1000.00



Memo Item

**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  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 127

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC**Mailing Address 2121 CRYSTAL DR  
STE 100City  
ARLINGTONState  
VAZip Code  
22202-3706FEC ID number of contributing  
federal political committee.**C** C00303024

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : ADBB7F3A4962F4CCF98E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MARATHON PETROLEUM CORPORATION EMPLOYEES PAC (MPAC)**

Mailing Address 539 S MAIN ST

City  
FINDLAYState  
OHZip Code  
45840-3229FEC ID number of contributing  
federal political committee.**C** C00496307

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A967F369976BA4760A48

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MORGAN STANLEY PAC**Mailing Address 401 9TH ST NW  
STE 650City  
WASHINGTONState  
DCZip Code  
20004-2151FEC ID number of contributing  
federal political committee.**C** C00337626

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A97FE5EC8B7EC4B87AE3

Amount of Each Receipt this Period

2500.00

☐ Memo Item**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)  
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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MORTGAGE BANKERS ASSOCIATION PAC (MORPAC)****A.**

Mailing Address 1919 M ST NW

FL 5

City

WASHINGTON

State

DC

Zip Code

20036-3572

FEC ID number of contributing  
federal political committee.**C** C00004812

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A6A4C5CEA192C4393AED

Amount of Each Receipt this Period

2000.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF BENEFITS AND INSURANCE PROFESSIONALS PAC (NABIP PAC)**

Mailing Address 999 E ST NW

STE 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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : A10130A7F54EA4CA7809

Amount of Each Receipt this Period

1000.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF REALTORS PAC**

Mailing Address 430 N MICHIGAN AVE

City

CHICAGO

State

IL

Zip Code

60611-4011

FEC ID number of contributing  
federal political committee.**C** C00030718

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A616C2225858D4D7AB86

Amount of Each Receipt this Period

2000.00



Memo Item

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

5000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary 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 |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF REALTORS PAC****A.**

Mailing Address 430 N MICHIGAN AVE

City

CHICAGO

State

IL

Zip Code

60611-4011

FEC ID number of contributing  
federal political committee.**C** C00030718

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A2C2360DE9B3749679A4

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS PAC****B.**Mailing Address 1325 G ST NW  
STE 1000

City

WASHINGTON

State

DC

Zip Code

20005-3134

FEC ID number of contributing  
federal political committee.**C** C00109306

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ACC523344A1FA4BFA904

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL BEER WHOLESALERS ASSOCIATION PAC****C.**Mailing Address 1101 KING ST  
STE 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: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A9A182EC4B1384629A96

Amount of Each Receipt this Period

1500.00



Memo Item

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

3500.00

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

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

PAGE 66 OF 127

|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCEMENT OF COTTON

**A.**

Mailing Address PO BOX 2995

City

CORDOVA

State

TN

Zip Code

38088-2995

FEC ID number of contributing  
federal political committee.**C** C00023028

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A86C8DAFC96984107945

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

NATIONAL EMERGENCY MEDICINE PAC / AMERICAN COLLEGE OF EMERGENCY PHYSICIANS

Mailing Address 4950 W ROYAL LN

City

IRVING

State

TX

Zip Code

75063-2524

FEC ID number of contributing  
federal political committee.**C** C00140061

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AF7A62FC852CE4E30AD2

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

NATIONAL FEDERATION OF INDEPENDENT BUSINESS FEDERAL PAC

Mailing Address 555 12TH ST NW  
STE 1001

City

WASHINGTON

State

DC

Zip Code

20004-1267

FEC ID number of contributing  
federal political committee.**C** C00101105

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AF0CF381771AC4BA891D

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 127

|                              |                              |                                         |                              |                             |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|-----------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL RURAL LETTER CARRIERS' ASSOCIATION PAC****A.**

Mailing Address 1630 DUKE ST

FL 2

City

ALEXANDRIA

State

VA

Zip Code

22314-3467

FEC ID number of contributing  
federal political committee.**C** C00072025

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 21  |   | 2023        |

Transaction ID : A54414B07FC484513AE4

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NETJETS ASSOCIATION OF SHARED AIRCRAFT PILOTS PAC; NJASAP PAC****B.**

Mailing Address 2740 AIRPORT DR

STE 330

City

COLUMBUS

State

OH

Zip Code

43219-2286

FEC ID number of contributing  
federal political committee.**C** C00488262

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2023        |

Transaction ID : A5EE65D1E7BBE45769C4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NETJETS INC PAC****C.**

Mailing Address 4111 BRIDGEWAY AVE

City

COLUMBUS

State

OH

Zip Code

43219-1882

FEC ID number of contributing  
federal political committee.**C** C00481309

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 25  |   | 2023        |

Transaction ID : A89BD7CE6E0B8445BBFF

Amount of Each Receipt this Period

4000.00

☐ Memo Item**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  
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)

**CAREY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
OHIO COAL ASSOCIATION PAC

Mailing Address 17 S. HIGH ST.

City  
COLUMBUSState  
OHZip Code  
43215FEC ID number of contributing  
federal political committee.**C** C00381277

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 14  |   | 2023        |

Transaction ID : A1F94F0C349374BA8BC2

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
OHIOHEALTH STAR CORPORATION PAC DBA OHIOHEALTH PACMailing Address 180 E BROAD ST  
FL 34City  
COLUMBUSState  
OHZip Code  
43215-3707FEC ID number of contributing  
federal political committee.**C** C00210617

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 08  |   | 28  |   | 2023        |

Transaction ID : ABBF59A30EF054A52901

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
PAC OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS--PAC OF AAOSMailing Address 317 MASSACHUSETTS AVE NE  
FL 1City  
WASHINGTONState  
DCZip Code  
20002-5769FEC ID number of contributing  
federal political committee.**C** C00343137

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 19  |   | 2023        |

Transaction ID : ADB926C1F5D114CF3B1F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2500.00

**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 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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PHILLIPS 66 PAC

**A.**Mailing Address 601 PENNSYLVANIA AVE NW  
STE 1150NCity  
WASHINGTONState  
DCZip Code  
20004-3650FEC ID number of contributing  
federal political committee.**C** C00513549

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 19  |   | 2023        |

Transaction ID : ADFD66D4F79C34083A8E

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PIONEER PAC

**B.**

Mailing Address 5738 MCNEVEN CT

City  
DUBLINState  
OHZip Code  
43017-2627FEC ID number of contributing  
federal political committee.**C** C00325357

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 20  |   | 2023        |

Transaction ID : A1647135C89D94384B85

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

**C.**

Mailing Address 6363 OAK TREE BLVD

City  
INDEPENDENCEState  
OHZip Code  
44131-2556FEC ID number of contributing  
federal political committee.**C** C00082271

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 14  |   | 2023        |

Transaction ID : A5A1A53BAF08841D990F

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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  
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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PRICEWATERHOUSECOOPERS PAC I

Mailing Address 655 NEW YORK AVE NW

STE 1100

City

WASHINGTON

State

DC

Zip Code

20001-5748

FEC ID number of contributing  
federal political committee.

C C00107235

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 14 2023

Transaction ID : AB7CA081172D14F7C938

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PRUDENTIAL FINANCIAL INC. FEDERAL PAC (AKA - PRUDENTIAL FEDERAL PAC)

Mailing Address 751 BROAD ST

FL 22

City

NEWARK

State

NJ

Zip Code

07102-3754

FEC ID number of contributing  
federal political committee.

C C00127779

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 30 2023

Transaction ID : A272B2551AF824745860

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SOUTHERN COMPANY EMPLOYEES PAC

Mailing Address 241 RALPH MCGILL BLVD NE

BIN 10230

City

ATLANTA

State

GA

Zip Code

30308-3374

FEC ID number of contributing  
federal political committee.

C C00144774

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 19 2023

Transaction ID : A38876B68DC7A4A81824

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 127

|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STANLEY BLACK &amp; DECKER, INC. PAC

Mailing Address 1201 PENNSYLVANIA AVE NW  
STE 800City  
WASHINGTONState  
DCZip Code  
20004-2401FEC ID number of contributing  
federal political committee.**C** C00060087

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 26  |   | 2023        |

Transaction ID : A42C74E99E6AA4DA2A56

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TEACHERS INSURANCE ANNUITY ASSOCIATION OF AMERICA PAC (TIAA PAC)

Mailing Address 1300 EYE STREET NW SUITE 300 WEST

City  
WASHINGTONState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.**C** C00431361

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2023        |

Transaction ID : A75DE8762CDD146E3A6F

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC. PAC (AOTPA)

Mailing Address 6116 EXECUTIVE BLVD  
STE 200City  
NORTH BETHESDAState  
MDZip Code  
20852-4925FEC ID number of contributing  
federal political committee.**C** C00089086

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 26  |   | 2023        |

Transaction ID : A296516F05A83498A84B

Amount of Each Receipt this Period

1000.00

☐ Memo Item**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)  
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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

THE BOEING COMPANY PAC

**A.**

Mailing Address 929 LONG BRIDGE DR

City

ARLINGTON

State

VA

Zip Code

22202-4208

FEC ID number of contributing  
federal political committee.**C** C00142711

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 14  |   | 2023        |

Transaction ID : AC120F233D6A24EDF990

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE COUNCIL OF INSURANCE AGENTS &amp; BROKERS PAC

**B.**Mailing Address 701 PENNSYLVANIA AVE NW  
STE 750

City

WASHINGTON

State

DC

Zip Code

20004-2661

FEC ID number of contributing  
federal political committee.**C** C00039578

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 18  |   | 2023        |

Transaction ID : A5F0EE30121564CCEBE0

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE GOODYEAR TIRE &amp; RUBBER COMPANY GOOD GOVERNMENT FUND (GOODYEAR GOOD GOVERNMENT FUND)

**C.**

Mailing Address 200 INNOVATION WAY

City

AKRON

State

OH

Zip Code

44316-0001

FEC ID number of contributing  
federal political committee.**C** C00100131

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2023        |

Transaction ID : A4B3BD0D2B0BB4EBA8BE

Amount of Each Receipt this Period

2500.00

☐ Memo Item**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)  
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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

THE KROGER CO. PAC

**A.**

Mailing Address 1014 VINE ST

City

CINCINNATI

State

OH

Zip Code

45202-1141

FEC ID number of contributing  
federal political committee.**C** C00059238

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

Transaction ID : AA5F1C0ED9D2144118AE

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICATION (A...

**B.**

Mailing Address 4301 WILSON BLVD

City

ARLINGTON

State

VA

Zip Code

22203-4419

FEC ID number of contributing  
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

Transaction ID : A8D752CA24B2F4B5FB80

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

THE OPTIONS CLEARING CORPORATION PAC

**C.**Mailing Address 125 S FRANKLIN ST  
STE 1200

City

CHICAGO

State

IL

Zip Code

60606-4601

FEC ID number of contributing  
federal political committee.**C** C00255877

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A2DBCC06DE6924A58AC6

Amount of Each Receipt this Period

1000.00



Memo Item

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

3000.00

**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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TRINITY INDUSTRIES EMPLOYEE PAC (SF) INC.

Mailing Address 14221 DALLAS PKWY  
STE 1100City  
DALLASState  
TXZip Code  
75254-2957FEC ID number of contributing  
federal political committee.

C C00268904

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 25 2023

Transaction ID : AC542BD08999C4796A06

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TRUCKING PAC OF THE AMERICAN TRUCKING ASSOCIATIONS INC.

Mailing Address 430 FIRST STREET SE

City  
WASHINGTONState  
DCZip Code  
20003-1826FEC ID number of contributing  
federal political committee.

C C00002881

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 07 2023

Transaction ID : AA9D19DADF7F04D73B8E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

U.S. BANCORP FEDERAL PAC

Mailing Address 950 F ST NW  
STE 750City  
WASHINGTONState  
DCZip Code  
20004-1487FEC ID number of contributing  
federal political committee.

C C00488882

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 28 2023

Transaction ID : ABE3F3892C01D41848AA

Amount of Each Receipt this Period

500.00

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

2500.00

**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 |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
UNUM GROUP PAC (UNUMPAC)

Mailing Address 1 FOUNTAIN SQ

City  
CHATTANOOGAState  
TNZip Code  
37402-1306FEC ID number of contributing  
federal political committee.**C** C00177436

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A9631F77097B7485BA72

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
US ENERGY PAC (THE PAC OF AMERICAN EXPLORATION & PRODUCTION COUNCIL, INC.)Mailing Address 999 E ST NW  
STE 200City  
WASHINGTONState  
DCZip Code  
20004-2041FEC ID number of contributing  
federal political committee.**C** C00755454

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

Transaction ID : ABE4A47929D724738AC0

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
VALERO ENERGY CORPORATION PAC

Mailing Address ONE VALERO WAY

City  
SAN ANTONIOState  
TXZip Code  
78249FEC ID number of contributing  
federal political committee.**C** C00109546

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AF1804EA657CD4BECB48

Amount of Each Receipt this Period

2500.00

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

4500.00

**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 |
| 12                           | 13a                          | 13b                                     | 14                           |
|                              |                              |                                         | 15                           |

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VERIZON COMMUNICATIONS, INC. PAC (VERIZON PAC)****A.**

Mailing Address 1300 I ST NW

ATTN: TAYLOR CRAIG

City

WASHINGTON

State

DC

Zip Code

20005-3314

FEC ID number of contributing  
federal political committee.**C** C00186288

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 07  |   | 14  |   | 2023        |

Transaction ID : A5502BA929EF94831B20

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. PAC****B.**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00147173

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 12  |   | 2023        |

Transaction ID : AD6747262B709496EBA0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y 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)..... ▶

2000.00

150250.00

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

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

OMNI HOTELS

**A.**

Mailing Address 4001 MAPLE AVE

STE 500

City

DALLAS

State

TX

Zip Code

75219-3241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1615.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A26C244EC360E4BE1AC1

Amount of Each Receipt this Period

826.04



Memo Item

REFUND TRAVEL EXPENSE

**B.**

Full Name (Last, First, Middle Initial)

OMNI HOTELS

Mailing Address 4001 MAPLE AVE

STE 500

City

DALLAS

State

TX

Zip Code

75219-3241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1615.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A26EF695FB46047779E0

Amount of Each Receipt this Period

789.47



Memo Item

REFUND TRAVEL EXPENSE

**C.**

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR.

City

DALLAS

State

TX

Zip Code

75235-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2209.34

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : A5B52374C52EA430FA34

Amount of Each Receipt this Period

5.60



Memo Item

REFUND TRAVEL EXPENSE

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

1621.11

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

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NAME OF COMMITTEE (In Full)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

A.

Mailing Address 2702 LOVE FIELD DR.

City

DALLAS

State

TX

Zip Code

75235-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2209.34

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

Transaction ID : A911F3243284B4FE7AAC

Amount of Each Receipt this Period

5.60



Memo Item

REFUND TRAVEL EXPENSE

B.

Full Name (Last, First, Middle Initial)

UNITED AIRLINES

Mailing Address 233 S WACKER DR

City

CHICAGO

State

IL

Zip Code

60606-7147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

426.90

Date of Receipt

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

Transaction ID : A01D956D6F4A94D4E8F0

Amount of Each Receipt this Period

391.90



Memo Item

REFUND TRAVEL EXPENSE

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

397.50



Memo Item

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

2018.61

**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 79 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ADOBE**

Mailing Address 345 PARK AVENUE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 31  |   | 2023    |

City  
SAN JOSEState  
CAZip Code  
95110-2704

FEC Identification Number

C

Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

29.02

Transaction ID : BC965893D4B2D43E49F2

☐ 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. ADOBE**

Mailing Address 345 PARK AVENUE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 31  |   | 2023    |

City  
SAN JOSEState  
CAZip Code  
95110-2704

FEC Identification Number

C

Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

29.99

Transaction ID : B3A5F1313C781450E95C

☐ 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. AMAZON**

Mailing Address 419 TERRY AVE N

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 14  |   | 2023    |

City  
SEATTLEState  
WAZip Code  
98109-5234

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12.43

Transaction ID : B7737DB669F274EC7851

☐ 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).....▶

71.44

**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 80 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE NE

City  
WASHINGTONState  
DCZip Code  
20002-4285Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

207.00

Transaction ID : B1A00B98AD1654DC2A5F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL**

Mailing Address PO BOX 716045

City  
PHILADELPHIAState  
PAZip Code  
19171-6045Purpose of Disbursement  
DATABASE SOFTWARE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2100.00

Transaction ID : B82BE5175F24741348E3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314-3109Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2030.25

Transaction ID : B159A8E0DD786407CBDA

☐ Memo Item

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

4337.25

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 81 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314-3109Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B1258F800E668480C89E

☐ Memo Item**B. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314-3109Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1012.03

Transaction ID : BBA49DCEAD7294926A05

☐ Memo Item**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314-3109Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1017.88

Transaction ID : BFA2F25BBBC524FBA866

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

3029.91

**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 82 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE NW

City  
WASHINGTONState  
DCZip Code  
20004-2601Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

182.90

Transaction ID : B0A3BD09D61B247DB9C3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE NW

City  
WASHINGTONState  
DCZip Code  
20004-2601Purpose of Disbursement  
CATERING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

568.15

Transaction ID : B596D171F4F114473B72

☐ 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

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

24.50

Transaction ID : B0709891C055444B1B15

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

775.55

**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 83 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY 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

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

174.35

Transaction ID : B4E496BD3A82B4FE891F

☐ 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

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

15.65

Transaction ID : B1BF37DB6EA874414B7B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHARLIE PALMER STEAK**

Mailing Address 101 CONSTITUTION AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-2133Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

52.40

Transaction ID : BE77F15347D284394B5F

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

242.40

**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 84 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CHOCOLATE CAFE**

Mailing Address 1855 NORTHWEST BLVD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 15  |   | 2023    |

City  
COLUMBUSState  
OHZip Code  
43212-1631

FEC Identification Number

C

Purpose of Disbursement  
CATERING

001

Amount of Each Disbursement this Period

1270.00

Transaction ID : B291D492A96D94E35A46

☐ Memo Item

Candidate Name

Category/  
Type

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. CLASSIC CITY BANK**

Mailing Address 2365 W BROAD ST.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 14  |   | 2023    |

City  
ATHENSState  
GAZip Code  
30606

FEC Identification Number

C

Purpose of Disbursement  
BANK FEE

001

Amount of Each Disbursement this Period

20.00

Transaction ID : B2D135059BDD24195B4E

☐ Memo Item

Candidate Name

Category/  
Type

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. CLAYTON HENSON CONSULTING, LLC**

Mailing Address 7341 PATCH CT

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 05  |   | 2023    |

City  
CANAL WINCHESTERState  
OHZip Code  
43110-0030

FEC Identification Number

C

Purpose of Disbursement  
STRATEGY CONSULTING

001

Amount of Each Disbursement this Period

5000.00

Transaction ID : BC0EA70C026CC4D6DB16

☐ Memo Item

Candidate Name

Category/  
Type

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).....▶

6290.00

**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 85 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CLAYTON HENSON CONSULTING, LLC**

Mailing Address 7341 PATCH CT

City  
CANAL WINCHESTERState  
OHZip Code  
43110-0030Purpose of Disbursement  
STRATEGY CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : BF2833802424743E0809

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CLAYTON HENSON CONSULTING, LLC**

Mailing Address 7341 PATCH CT

City  
CANAL WINCHESTERState  
OHZip Code  
43110-0030Purpose of Disbursement  
STRATEGY CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : BE5757614AE3847E9975

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONSERVATIVE CAMPAIGN TECHNOLOGY, LLC**

Mailing Address 16192 COASTAL HWY

City  
LEWESState  
DEZip Code  
19958-3608Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.12

Transaction ID : BC9D5366252F4493C895

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

10001.12

**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 86 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CONSERVATIVE CAMPAIGN TECHNOLOGY, LLC**

Mailing Address 16192 COASTAL HWY

City  
LEWESState  
DEZip Code  
19958-3608Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

75.00

Transaction ID : BD3B5B84CAAAD441EAEE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONSERVATIVE CAMPAIGN TECHNOLOGY, LLC**

Mailing Address 16192 COASTAL HWY

City  
LEWESState  
DEZip Code  
19958-3608Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : B0C267AA1D4BA4F928EF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONSERVATIVE CAMPAIGN TECHNOLOGY, LLC**

Mailing Address 16192 COASTAL HWY

City  
LEWESState  
DEZip Code  
19958-3608Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.37

Transaction ID : BBB5D620462DA4DB38D2

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

90.37

**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 87 OF 127

|                                               |                              |                              |                              |
|-----------------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. DIRECT MAIL PROCESSORS**

Mailing Address 1150 CONRAD CT

City  
HAGERSTOWNState  
MDZip Code  
21740-5905Purpose of Disbursement  
DIRECT MAIL SERVICES

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

354.21

Transaction ID : B05EF5DE0AA82450AB39

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELITE CARD PROCESSING**Mailing Address 13701 MAUGANSVILLE RD  
STE 5City  
HAGERSTOWNState  
MDZip Code  
21740-2413Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

87.34

Transaction ID : B30E45174795D42039E9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ELITE CARD PROCESSING**Mailing Address 13701 MAUGANSVILLE RD  
STE 5City  
HAGERSTOWNState  
MDZip Code  
21740-2413Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

51.63

Transaction ID : BD7585CEBA1FF43A38F1

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

493.18

**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 88 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ELITE CARD PROCESSING**Mailing Address 13701 MAUGANSVILLE RD  
STE 5City  
HAGERSTOWNState  
MDZip Code  
21740-2413Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

48.04

Transaction ID : B9CD645EA37D644578DC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 SHADY GROVE RD S

City  
MEMPHISState  
TNZip Code  
38120-4117Purpose of Disbursement  
SHIPPING

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.55

Transaction ID : B030F5A77167B4BF8AA6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 SHADY GROVE RD S

City  
MEMPHISState  
TNZip Code  
38120-4117Purpose of Disbursement  
SHIPPING

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.55

Transaction ID : BD1845F0DEF6B40408ED

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

119.14

**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 89 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 SHADY GROVE RD S

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08  | 07  | 2023    |

City  
MEMPHISState  
TNZip Code  
38120-4117Purpose of Disbursement  
SHIPPING

001

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

11.85

Transaction ID : BCB1428AF4651403D839

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 942 SHADY GROVE RD S

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08  | 28  | 2023    |

City  
MEMPHISState  
TNZip Code  
38120-4117Purpose of Disbursement  
SHIPPING

001

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

11.85

Transaction ID : B140E71B2F9FE4BD58B8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 942 SHADY GROVE RD S

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 05  | 2023    |

City  
MEMPHISState  
TNZip Code  
38120-4117Purpose of Disbursement  
SHIPPING

001

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

11.85

Transaction ID : BDFD7F467A66B48328A7

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

35.55

**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 90 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 942 SHADY GROVE RD S

City  
MEMPHISState  
TNZip Code  
38120-4117Purpose of Disbursement  
SHIPPING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 21  | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

11.85

Transaction ID : B8D1BBD87C02142F594D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FROST BROWN TODD LLP**Mailing Address 10 W BROAD ST  
STE 2300City  
COLUMBUSState  
OHZip Code  
43215-3484Purpose of Disbursement  
LEGAL FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 14  | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BBB84560E06BB4418BBF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FROST BROWN TODD LLP**Mailing Address 10 W BROAD ST  
STE 2300City  
COLUMBUSState  
OHZip Code  
43215-3484Purpose of Disbursement  
LEGAL FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 09  | 22  | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

151.50

Transaction ID : B4FDE1DFEB1674BAA83C

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

2663.35

**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 91 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FULFILLMENT SOLUTIONS, INC.**Mailing Address 44970 FALCON PL  
STE 400City  
STERLINGState  
VAZip Code  
20166-9568Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

54.39

Transaction ID : B984A7BB7F7EA4A309C4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FULFILLMENT SOLUTIONS, INC.**Mailing Address 44970 FALCON PL  
STE 400City  
STERLINGState  
VAZip Code  
20166-9568Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

763.30

Transaction ID : BD596B87B29E44122A83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FULFILLMENT SOLUTIONS, INC.**Mailing Address 44970 FALCON PL  
STE 400City  
STERLINGState  
VAZip Code  
20166-9568Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1198.28

Transaction ID : BBADE4DE2B0D44538BD0

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

2015.97

**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 92 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FULFILLMENT SOLUTIONS, INC.**Mailing Address 44970 FALCON PL  
STE 400City  
STERLINGState  
VAZip Code  
20166-9568Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

900.43

Transaction ID : B86173E5DFA5C45798A0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1351Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

52.24

Transaction ID : BDFA143E8983048EAA6D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1351Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

58.06

Transaction ID : BFB3F91C50393425E93B

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

1010.73

**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 93 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1351Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

58.06

Transaction ID : BD3F870FF39BF4ACBA86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GRAND VALLEY CONSULTING, LLC**

Mailing Address 1931 BEAVER LN

City  
MC LEANState  
VAZip Code  
22101-5534Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

22351.26

Transaction ID : BECF09F7F69704459BD0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GRAND VALLEY CONSULTING, LLC**

Mailing Address 1931 BEAVER LN

City  
MC LEANState  
VAZip Code  
22101-5534Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

9046.54

Transaction ID : B9937186905714C6790B

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

31455.86

**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 94 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GRAND VALLEY CONSULTING, LLC**

Mailing Address 1931 BEAVER LN

City  
MC LEANState  
VAZip Code  
22101-5534Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8841.65

Transaction ID : B1DCB6020D62F4AF789E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GREATER GEORGIA PRINTERS, INC.**

Mailing Address PO BOX 75

City  
CRAWFORDState  
GAZip Code  
30630-0075Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

295.92

Transaction ID : BC7A92322CB7C4481B7D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HELFRICH, ANDREA, , ,**

Mailing Address 1841 ROXBURY RD

City  
COLUMBUSState  
OHZip Code  
43212-1964Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

988.20

Transaction ID : B10374294EF7C4053805

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

10125.77

**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 95 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. QUEEN CITY CLUB**

Mailing Address 331 E 4TH ST

City  
CINCINNATIState  
OHZip Code  
45202-4266Purpose of Disbursement  
TRAVEL EXPENSE

002

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 |
| 07  | / | 17  | / | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

988.20

Transaction ID : B26D0B87C9DFD418E89D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. HSP DIRECT, LLC**Mailing Address 20130 LAKEVIEW CENTER PLZ  
STE 300City  
ASHBURNState  
VAZip Code  
20147-5905Purpose of Disbursement  
DIRECT MAIL SERVICES

001

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 |
| 09  | / | 21  | / | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2928.59

Transaction ID : B7F14D39F307843B980B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. IDONATEPRO.COM**Mailing Address 2033 SAN ELIJO AVE  
# 203City  
CARDIFF BY THE SEAState  
CAZip Code  
92007-1726Purpose of Disbursement  
SOFTWARE

001

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 |
| 07  | / | 11  | / | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B08390580F7494196A66

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

3078.59

**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 96 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. IDONATEPRO.COM**Mailing Address 2033 SAN ELIJO AVE  
# 203City  
CARDIFF BY THE SEAState  
CAZip Code  
92007-1726Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B44EA676A07FD4D2BB3E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. IDONATEPRO.COM**Mailing Address 2033 SAN ELIJO AVE  
# 203City  
CARDIFF BY THE SEAState  
CAZip Code  
92007-1726Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B2FFF582FB1294C30A95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTEGRAM**

Mailing Address 22695 COMMERCE CENTER CT

City  
STERLINGState  
VAZip Code  
20166-2088Purpose of Disbursement  
DIRECT MAIL SERVICES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

892.92

Transaction ID : B421E998928C645BA82E

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

1192.92

**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 97 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. IRON GRILL BARBECUE & BREW**

Mailing Address 5295 N HIGH ST

City  
COLUMBUSState  
OHZip Code  
43214-1239Purpose of Disbursement  
CATERING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 10  | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B02DB788BA687450CA67

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KELLY, BLAINE, , ,**

Mailing Address 2375 KILLDEER PLACE

City  
GALENAState  
OHZip Code  
43021-7500Purpose of Disbursement  
FIELD CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 07  | 17  | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BCF69915F4BB44138B25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KELLY, BLAINE, , ,**

Mailing Address 2375 KILLDEER PLACE

City  
GALENAState  
OHZip Code  
43021-7500Purpose of Disbursement  
FIELD CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 08  | 16  | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BF2B9019F94CB469BB29

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

3000.00

**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 98 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. KELLY, BLAINE, , ,**

Mailing Address 2375 KILLDEER PLACE

City  
GALENAState  
OHZip Code  
43021-7500Purpose of Disbursement  
FIELD CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BE4B4FA9B284B4703A44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KROGER**

Mailing Address 150 W SYCAMORE ST

City  
COLUMBUSState  
OHZip Code  
43215-5618Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

73.37

Transaction ID : B8317D8CAB4484837A43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KROGER**

Mailing Address 150 W SYCAMORE ST

City  
COLUMBUSState  
OHZip Code  
43215-5618Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

79.53

Transaction ID : BFB04E2FB0DAF4689A2A

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

652.90

**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 99 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. KROGER**

Mailing Address 150 W SYCAMORE ST

City  
COLUMBUSState  
OHZip Code  
43215-5618Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.98

Transaction ID : BD4251EA869DC40B5A03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LAND-GRANT BREWING COMPANY**

Mailing Address 424 W TOWN ST

City  
COLUMBUSState  
OHZip Code  
43215-4040Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

118.25

Transaction ID : BB90BCFCB5CA14D0F947

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LAND-GRANT BREWING COMPANY**

Mailing Address 424 W TOWN ST

City  
COLUMBUSState  
OHZip Code  
43215-4040Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

128.25

Transaction ID : B58F7D35813CC4BDEB54

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

257.48

**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 100 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LINDEY'S**

Mailing Address 169 E BECK ST.

City  
COLUMBUSState  
OHZip Code  
43206Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

144.94

Transaction ID : B8A4B38DF0AD4477BB74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LINDEY'S**

Mailing Address 169 E BECK ST.

City  
COLUMBUSState  
OHZip Code  
43206Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

155.07

Transaction ID : B261A51383F1B45AE8A3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MADISON COUNTY FAIR SALES COMMITTEE**

Mailing Address 200 ELM ST

City  
LONDONState  
OHZip Code  
43140-2131Purpose of Disbursement  
LIVESTOCK SALE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B15795852B5514677912

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

700.01

**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 101 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MAILCHIMP**Mailing Address 675 PONCE DE LEON AVE NE  
STE 5000City  
ATLANTAState  
GAZip Code  
30308-2172Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

270.00

Transaction ID : B00E65D27356D4F3E877

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAILCHIMP**Mailing Address 675 PONCE DE LEON AVE NE  
STE 5000City  
ATLANTAState  
GAZip Code  
30308-2172Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

270.00

Transaction ID : B1B378E6B209849FCB7F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MAILCHIMP**Mailing Address 675 PONCE DE LEON AVE NE  
STE 5000City  
ATLANTAState  
GAZip Code  
30308-2172Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

270.00

Transaction ID : B3EA29587E9474AB598D

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

810.00

**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 102 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MARIOTT**

Mailing Address 10400 FERNWOOD RD

Date of Disbursement

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

City  
BETHESDAState  
MDZip Code  
20817-1102

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

180.59

Transaction ID : B260ABC31FA644CF4BE7

☐ 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. MIAMI COUNTY FAIR**

Mailing Address 650 N COUNTY ROAD 25A

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

City  
TROYState  
OHZip Code  
45373-1397

FEC Identification Number

C

Purpose of Disbursement  
LIVESTOCK SALE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B36F53ADB3B674FDD8A9

☐ 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. MIDDLETOWN VALLEY BANK**Mailing Address 245 W MAIN ST.  
P.O. BOX 75

Date of Disbursement

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

City  
MIDDLETOWNState  
MDZip Code  
21769-0075

FEC Identification Number

C

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

39.76

Transaction ID : B1C3B98D18C1A4303AF3

☐ 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).....▶

720.35

**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 103 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MIDDLETOWN VALLEY BANK**Mailing Address 245 W MAIN ST.  
P.O. BOX 75City  
MIDDLETOWNState  
MDZip Code  
21769-0075Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

43.25

Transaction ID : BC6926C9E99124E58ACC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIDDLETOWN VALLEY BANK**Mailing Address 245 W MAIN ST.  
P.O. BOX 75City  
MIDDLETOWNState  
MDZip Code  
21769-0075Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

43.08

Transaction ID : B3124D6A50A424FF2BC2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MUNOZ, DARRIN, , ,**

Mailing Address 8628 OAK CHASE CIR

City  
FAIRFAX STATIONState  
VAZip Code  
22039-3328Purpose of Disbursement  
FIELD CONSULTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BE545A86DC8CB4A628B4

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

586.33

**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 104 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MUNOZ, DARRIN, , ,**

Mailing Address 8628 OAK CHASE CIR

City  
FAIRFAX STATIONState  
VAZip Code  
22039-3328Purpose of Disbursement  
FIELD CONSULTING

001

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 |
| 08  |   | 16  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BDC2E143964D1476DA94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MUNOZ, DARRIN, , ,**

Mailing Address 8628 OAK CHASE CIR

City  
FAIRFAX STATIONState  
VAZip Code  
22039-3328Purpose of Disbursement  
FIELD CONSULTING

001

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 |
| 09  |   | 18  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BE94498BCB39745AFAE2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NOVA**Mailing Address 20130 LAKEVIEW CENTER PLZ  
STE 300City  
ASHBURNState  
VAZip Code  
20147-5905Purpose of Disbursement  
LIST RENTAL

001

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 |
| 09  |   | 07  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

437.50

Transaction ID : B04E52B30B63B420FB63

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

1437.50

**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 105 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. POSTAGE FOR DIRECT MAIL FUNDRAISING, LLC**Mailing Address 20130 LAKEVIEW CENTER PLZ  
STE 300City  
ASHBURNState  
VAZip Code  
20147-5905Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1071.45

Transaction ID : B3B558876A2AB4F2EA0E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. POSTAGE FOR DIRECT MAIL FUNDRAISING, LLC**Mailing Address 20130 LAKEVIEW CENTER PLZ  
STE 300City  
ASHBURNState  
VAZip Code  
20147-5905Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : BCC58D11CABBB44F6AB3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. POSTAGE FOR DIRECT MAIL FUNDRAISING, LLC**Mailing Address 20130 LAKEVIEW CENTER PLZ  
STE 300City  
ASHBURNState  
VAZip Code  
20147-5905Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1671.65

Transaction ID : BAE8B4199F0A84C1C8DD

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

3143.10

**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 106 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2095.71

Transaction ID : BE33E5E384782475B86A

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2037.43

Transaction ID : B99CF919C209446D6B36

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2036.32

Transaction ID : B1BB411693F2D4FBDDBE

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

6169.46

**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 107 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN MAIN STREET PARTNERSHIP**

Mailing Address 411 NEW JERSEY AVE SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 18  |   | 2023    |

City  
WASHINGTONState  
DCZip Code  
20003-4007

FEC Identification Number

C

Purpose of Disbursement  
FACILITY RENTAL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : BC7989432997448A4B6C

☐ 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. ROSEWOOD HOTELS**

Mailing Address 252 HIGH HOLBORN

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 14  |   | 2023    |

City  
LONDON ENGLANDState  
ZZZip Code  
99999

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.87

Transaction ID : BD9626D26EC5C4AFC829

☐ 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. ROSEWOOD HOTELS**

Mailing Address 252 HIGH HOLBORN

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 14  |   | 2023    |

City  
LONDON ENGLANDState  
ZZZip Code  
99999

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

0.19

Transaction ID : BE4B4F8EF8476463EB81

☐ 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).....▶

251.06

**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 108 OF 127

|                                               |                              |                              |                              |
|-----------------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ROSEWOOD HOTELS**

Mailing Address 252 HIGH HOLBORN

City  
LONDON ENGLANDState  
ZZZip Code  
99999Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.52

Transaction ID : B98E8EBC4ACB641CA8AD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROSEWOOD HOTELS**

Mailing Address 252 HIGH HOLBORN

City  
LONDON ENGLANDState  
ZZZip Code  
99999Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.36

Transaction ID : BC4E8821036FF40A4A7B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROSEWOOD HOTELS**

Mailing Address 252 HIGH HOLBORN

City  
LONDON ENGLANDState  
ZZZip Code  
99999Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

261.97

Transaction ID : BA58199DE63224065AE7

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

264.85

**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 109 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ROSEWOOD HOTELS**

Mailing Address 252 HIGH HOLBORN

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 14  |   | 2023    |

City  
LONDON ENGLANDState  
ZZZip Code  
99999Purpose of Disbursement  
TRAVEL EXPENSE

002

Category/  
Type

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:

FEC Identification Number

C

Amount of Each Disbursement this Period

96.84

Transaction ID : B1BD7750F0B014E2C8BE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SAZERAC COMPANY, INC. PAC (SAZERACPAC)**

Mailing Address 507 C ST NE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 09  |   | 11  |   | 2023    |

City  
WASHINGTONState  
DCZip Code  
20002-5809Purpose of Disbursement  
FACILITY RENTAL AND BEVERAGES

001

Category/  
Type

Candidate Name

SAZERAC COMPANY, INC. PAC (SAZERACPAC)

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:

FEC Identification Number

C C00639138

Amount of Each Disbursement this Period

369.83

Transaction ID : BD2A6689E7CE546A2BBA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SEWMOUSE4U**

Mailing Address 111 FIRETHORN COURT

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  |   | 27  |   | 2023    |

City  
UPPER MARLBOROState  
MDZip Code  
20774-1660Purpose of Disbursement  
EMBROIDERY ON SOCKS AND BAGS

001

Category/  
Type

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:

FEC Identification Number

C

Amount of Each Disbursement this Period

814.00

Transaction ID : B3F9BF4C84D274D37A78

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

1280.67

**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 110 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR.

City  
DALLASState  
TXZip Code  
75235-1908Purpose of Disbursement  
TRAVEL EXPENSE

002

Category/  
Type

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 |
| 0 | 8 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.60

Transaction ID : B15CAEE0697C64FF4B34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR.

City  
DALLASState  
TXZip Code  
75235-1908Purpose of Disbursement  
TRAVEL EXPENSE

002

Category/  
Type

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 |
| 0 | 8 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

5.60

Transaction ID : BEAAC99A398F64FA88AE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STAPLES**

Mailing Address 1747 OLENTANGY RIVER RD

City  
COLUMBUSState  
OHZip Code  
43212-1453Purpose of Disbursement  
OFFICE SUPPLIES

001

Category/  
Type

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 |
| 0 | 8 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

92.74

Transaction ID : B5B96FAEF01844787B98

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

103.94

**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 111 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE AVENTINE GROUP**

Mailing Address 107 CHESHIRE RD

City  
HUDSONState  
OHZip Code  
44236-2675Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.60

Transaction ID : BA5C510B7C9DD4235AFF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE AVENTINE GROUP**

Mailing Address 107 CHESHIRE RD

City  
HUDSONState  
OHZip Code  
44236-2675Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : BA8ACED07E81F41489C1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE AVENTINE GROUP**

Mailing Address 107 CHESHIRE RD

City  
HUDSONState  
OHZip Code  
44236-2675Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8.00

Transaction ID : B8FDA37AA69F249A2959

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

48.60

**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 112 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE AVENTINE GROUP**

Mailing Address 107 CHESHIRE RD

City  
HUDSONState  
OHZip Code  
44236-2675Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B18A5FD848E7A4C0EBBC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE COOK REPORT**Mailing Address 2311 WILSON BLVD  
FL 3City  
ARLINGTONState  
VAZip Code  
22201-5436Purpose of Disbursement  
SUBSCRIPTION

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : BAA8F4DE2D84E42F58D3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE COOK REPORT**Mailing Address 2311 WILSON BLVD  
FL 3City  
ARLINGTONState  
VAZip Code  
22201-5436Purpose of Disbursement  
SUBSCRIPTION

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : B7326C954BD8B412DA07

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

70.20

**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 113 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE COOK REPORT**Mailing Address 2311 WILSON BLVD  
FL 3City  
ARLINGTONState  
VAZip Code  
22201-5436Purpose of Disbursement  
SUBSCRIPTION

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : BAE8CC8B289954834949

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE CORNER MARKET**

Mailing Address 400 E CAPITOL ST. NE

City  
WASHINGTONState  
DCZip Code  
20003-3811Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

295.38

Transaction ID : B4A0A0B6DB7A849AFA09

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE MONKS COPY SHOP**

Mailing Address 47 E GAY ST

City  
COLUMBUSState  
OHZip Code  
43215-3103Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

53.75

Transaction ID : B3D55654558E84BC8A2D

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

384.13

**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 114 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE MONKS COPY SHOP**

Mailing Address 47 E GAY ST

City  
COLUMBUSState  
OHZip Code  
43215-3103Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

53.75

Transaction ID : BC72F722E223E4A60A84

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE MONKS COPY SHOP**

Mailing Address 47 E GAY ST

City  
COLUMBUSState  
OHZip Code  
43215-3103Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

18.81

Transaction ID : BCA10C65C3B194667A47

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE MONKS COPY SHOP**

Mailing Address 47 E GAY ST

City  
COLUMBUSState  
OHZip Code  
43215-3103Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

92.60

Transaction ID : B17CB5BA428CC4AFF86F

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

165.16

**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 115 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE MONKS COPY SHOP**

Mailing Address 47 E GAY ST

City  
COLUMBUSState  
OHZip Code  
43215-3103Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

101.62

Transaction ID : B3F8E718B82E74526B82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE WOODBURY**

Mailing Address 215 E TOWN ST

City  
COLUMBUSState  
OHZip Code  
43215-4609Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : BF6AFBAF32BE24BB3853

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE WOODBURY**

Mailing Address 215 E TOWN ST

City  
COLUMBUSState  
OHZip Code  
43215-4609Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

125.73

Transaction ID : BF56E3FBA95094F89AC2

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

267.35

**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 116 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE WOODBURY**

Mailing Address 215 E TOWN ST

City  
COLUMBUSState  
OHZip Code  
43215-4609Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

67.36

Transaction ID : B24D91C03BC90411A8F5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE WOODBURY**

Mailing Address 215 E TOWN ST

City  
COLUMBUSState  
OHZip Code  
43215-4609Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

46.00

Transaction ID : B8AFDEC9E4F7045E7B91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE WOODBURY**

Mailing Address 215 E TOWN ST

City  
COLUMBUSState  
OHZip Code  
43215-4609Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

38.12

Transaction ID : BC67E32E8DED44591876

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

151.48

**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 117 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. TONY'S ITALIAN RISTORANTE**

Mailing Address 16 W BECK ST

City  
COLUMBUSState  
OHZip Code  
43215-5609Purpose of Disbursement  
CATERING

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

341.11

Transaction ID : B876E8B4908F348BE92D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TWENTY-FIRST CENTURY GROUP, INC.**

Mailing Address 434 NEW JERSEY AVE SE

City  
WASHINGTONState  
DCZip Code  
20003-4008Purpose of Disbursement  
FACILITY RENTAL

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1375.00

Transaction ID : BBA35B00DBF4748F4B2D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : B0C61BD8B0DC04011BF6

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

1726.11

**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 118 OF 127

|                                               |                             |                              |                              |
|-----------------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

32.84

Transaction ID : B460B333455F446A5AB8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

29.13

Transaction ID : B8121B16794DB4802BC7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

88.08

Transaction ID : B09D84E1434FB409D8B5

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

150.05

**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 119 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

29.76

Transaction ID : B593587BAD2674622BDA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

59.70

Transaction ID : BE7624C638D7D4E38B0E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

29.69

Transaction ID : B1EE15FF9640A4D8890A

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

119.15

**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 120 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

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

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

52.00

Transaction ID : BF73C95FB662942518D2

☐ 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

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : B287749A15B35435F820

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

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

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

891.80

Transaction ID : B8B234EE24928411C808

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

978.80

**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 121 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 850 TWIN RIVERS DR

City  
COLUMBUSState  
OHZip Code  
43216-9002Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

66.00

Transaction ID : BD08E2192B25B4E698A6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WALIGURA, WALTER, , ,**

Mailing Address 3498 LEIGHTON RD

City  
COLUMBUSState  
OHZip Code  
43221-1323Purpose of Disbursement  
TRAVEL EXPENSE - NO ITEMIZATION NECESSARY

001

Candidate Name

Category/  
Type

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 |
| 0 | 9 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

106.52

Transaction ID : BA9D12E0646904386BE4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WEST ORANGE LIMO & CAR SERVICE**

Mailing Address EWR WEST ORANGE AIRPORT

City  
WEST ORANGEState  
NJZip Code  
07052Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

266.00

Transaction ID : B0E98777A529C40D4899

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

438.52

**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 122 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

287.70

Transaction ID : BDDE72D1A29A74BF29C2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Category/  
Type

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 |
| 0 | 7 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.59

Transaction ID : BB4B590ED6C19428DBA4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

249.21

Transaction ID : B4FB965B6D7214F4D8DC

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

537.50

**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 123 OF 127

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

19.70

Transaction ID : BBFACC585A7284C8AAE2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

49.25

Transaction ID : B1F81494A9658481886A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

19.70

Transaction ID : BA53616B3A2AD427BB50

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

88.65

**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 124 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

23.64

Transaction ID : BA1644F367276488AAB2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8.87

Transaction ID : BA990F150D6C04DABB98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : B53526A7FFF1D4EC6832

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

32.71

**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 125 OF 127

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

**CAREY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

60.48

Transaction ID : B008965F2836446CE9CF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

687.53

Transaction ID : B937D791993BA4592BFB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES, LLC**Mailing Address 1776 WILSON BLVD  
STE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CC TRANSACTION FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

149.72

Transaction ID : B4DF73A03DB22480F844

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

897.73

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

102462.89

**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 126 OF 127

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CANAL WINCHESTER LABOR DAY FESTIVAL**

Mailing Address 45 E WATERLOO ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 07  |   | 2023    |

City  
CANAL WINCHESTERState  
OHZip Code  
43110-2101

FEC Identification Number

C

Purpose of Disbursement  
DONATION-LIVESTOCK SALE

012

Amount of Each Disbursement this Period

250.00

Transaction ID : B903D466C300E4B0285C

☐ Memo Item

Candidate Name

Category/  
Type

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. EDMONDS FOR UA**

Mailing Address PO BOX 20943

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 17  |   | 2023    |

City  
COLUMBUSState  
OHZip Code  
43220-0943

FEC Identification Number

C

Purpose of Disbursement  
CONTRIBUTION TO LOCAL/STATE COMMITTEE

011

Amount of Each Disbursement this Period

500.00

Transaction ID : B69F5B864B08745589DC

☐ Memo ItemCandidate Name  
EDMONDS FOR UACategory/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. FAYETTE COUNTY FAIR**

Mailing Address 211 S 5TH ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 08  |   | 07  |   | 2023    |

City  
COLUMBUSState  
OHZip Code  
43215-5203

FEC Identification Number

C

Purpose of Disbursement  
DONATION-LIVESTOCK SALE

012

Amount of Each Disbursement this Period

280.00

Transaction ID : B40118038004F4D5BBA9

☐ Memo Item

Candidate Name

Category/  
Type

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).....▶

1030.00

**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 127 OF 127

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <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)

CAREY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SHELBY COUNTY FAIR**

Mailing Address 16023 MCCARTYVILLE RD

City  
ANNAState  
OHZip Code  
45302-9749Purpose of Disbursement  
DONATION-LIVESTOCK SALE

012

Candidate Name

Category/  
Type

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 |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B06BFDE646F964D0582B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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 |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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 |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

300.00

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

1330.00