

**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.

1 2 F E 4 M 5

SCOTT FRANKLIN FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 2811

Check if different  
than previously  
reported. (ACC)

LAKELAND

FL

33806

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00742247

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

FL

18

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer

CRATE, BRADLEY, T., MR.,

Signature of Treasurer

CRATE, BRADLEY, T., MR.,

Date

M M /

D D /

Y Y Y Y

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**SCOTT FRANKLIN FOR CONGRESS**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 1 |   | 2 | 0 | 2 | 5 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 2 | 5 |

|  | 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))....  | 55510.43                | 314936.70                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....  | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 55510.43                | 314936.70                          |
| 7. Net Operating Expenditures  |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....   | 47769.26                | 177207.38                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....   | 0.00                    | 255.08                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 47769.26                | 176952.30                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....  | 615312.30               |                                    |
| 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) ..... | 298500.00               |                                    |

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

**SCOTT FRANKLIN FOR CONGRESS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
10 / 01 / 2025

To:

M M / D D / Y Y Y Y  
12 / 31 / 2025**I. RECEIPTS****COLUMN A**  
**Total This Period****COLUMN B**  
**Election Cycle-to-Date****11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than  
Political Committees****(i) Itemized (use Schedule A).....**

13800.00

106700.00

**(ii) Unitemized .....**

210.43

2236.70

**(iii) TOTAL of contributions  
from individuals .....**

14010.43

108936.70

**(b) Political Party Committees.....**

0.00

0.00

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

41500.00

206000.00

**(d) The Candidate .....**

0.00

0.00

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

55510.43

314936.70

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

0.00

48000.00

**13. LOANS:****(a) Made or Guaranteed by the  
Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

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

0.00

0.00

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

0.00

255.08

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

3551.10

11471.82

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

59061.53

374663.60

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 47769.26                      | 177207.38                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 20000.00                           |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 242262.82                          |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 242262.82                          |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 0.00                               |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 47769.26                      | 439470.20                          |

## **III. CASH SUMMARY**

|   |           |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 604020.03 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 59061.53  |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 663081.56 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 47769.26  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 615312.30 |

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

PAGE 5 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

**A.**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

559.23

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.165254145

Amount of Each Receipt this Period

23.98

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.**B.**

Full Name (Last, First, Middle Initial)

CORRIGAN, JOSEPH, , ,

Mailing Address 9230 OLD KEENE MILL ROAD

City

SAINT PAUL

State

MN

Zip Code

55101

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

Name of Employer

Occupation

CORRIGAN USSERY

GOVT AFFAIRS

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.164785951

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2020



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 3 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161778392

Amount of Each Receipt this Period

25.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.**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 6 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HAM, JAMES, , , III

**A.**

Mailing Address PO BOX 5106

City

LAKELAND

State

FL

Zip Code

33807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

J H HAM ENGINEERING INC

Occupation

ELECTRICAL ENGINEER

Receipt For: 2020



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2025D D / Y Y Y Y Y  
01 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.161778428

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 08 / 2025D D / Y Y Y Y Y  
08 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.161879379

Amount of Each Receipt this Period

1.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 16 / 2025D D / Y Y Y Y Y  
16 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.162086484

Amount of Each Receipt this Period

60.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

25.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BROWN, BERT, , ,

**A.**

Mailing Address 2917 INDIAN CREEK DR

City

BISHOP

State

CA

Zip Code

93514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BROWNS SUPPLY INC

Occupation  
SALESMAN

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 12 2025

Transaction ID : SA11AI.162089315

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

NELSON, CRAIG, , ,

**B.**

Mailing Address 5306 WOOD TRAIL AVE NE

City

CANTON

State

OH

Zip Code

44705

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TREMCO

Occupation  
ENGINEER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 12 2025

Transaction ID : SA11AI.162089316

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 22 2025

Transaction ID : SA11AI.162250104

Amount of Each Receipt this Period

10.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

50.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
10 24 2025

Transaction ID : SA11AI.162314920

Amount of Each Receipt this Period

100.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
10 29 2025

Transaction ID : SA11AI.162497618

Amount of Each Receipt this Period

1.86

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
11 03 2025

Transaction ID : SA11AI.164597491

Amount of Each Receipt this Period

1.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

**A.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
11 05 2025

Transaction ID : SA11AI.164620527

Amount of Each Receipt this Period

25.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)  
HAM, JAMES, , III

**B.** Mailing Address PO BOX 5106

City  
LAKELAND

State  
FL

Zip Code  
33807

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

J H HAM ENGINEERING INC

ELECTRICAL ENGINEER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 01 2025

Transaction ID : SA11AI.164620837

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)  
WINRED

**C.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
11 06 2025

Transaction ID : SA11AI.164713492

Amount of Each Receipt this Period

1.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

25.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

**A.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y  
11 12 2025

Transaction ID : SA11AI.164854874

Amount of Each Receipt this Period

0.93

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)  
WINRED

**B.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y  
11 14 2025

Transaction ID : SA11AI.164947911

Amount of Each Receipt this Period

60.93

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)  
BROWN, BERT, , ,

**C.** Mailing Address 2917 INDIAN CREEK DR

City  
BISHOP

State  
CA

Zip Code  
93514

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
SALESMAN

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
11 12 2025

Transaction ID : SA11AI.164948006

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED  
DEBT RETIREMENT

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

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

25.00

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

PAGE 11 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NELSON, CRAIG, , ,

**A.**

Mailing Address 5306 WOOD TRAIL AVE NE

City  
CANTONState  
OHZip Code  
44705FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TREMCOOccupation  
ENGINEER

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 12  |   | 2025    |

Transaction ID : SA11AI.164948007

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 19  |   | 2025    |

Transaction ID : SA11AI.165094157

Amount of Each Receipt this Period

550.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)

KIME, CARL, , ,

**C.**

Mailing Address 2231 N QUEBEC ST

City  
ARLINGTONState  
VAZip Code  
22207FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INNOVATIVE FEDERAL STRATEGIESOccupation  
PRINCIPAL

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 17  |   | 2025    |

Transaction ID : SA11AI.165095679

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

525.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MEYER, GARRETT, , ,

**A.**

Mailing Address 4308 BRAEMAR AVE

City

LAKELAND

State

FL

Zip Code

33813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
APPLIED MEDICAL

Occupation  
SALES

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
11 16 2025

Transaction ID : SA11AI.165095680

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y  
11 21 2025

Transaction ID : SA11AI.165165535

Amount of Each Receipt this Period

5.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y  
11 24 2025

Transaction ID : SA11AI.165193575

Amount of Each Receipt this Period

10.93

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
11 28 2025

Transaction ID : SA11AI.165287732

Amount of Each Receipt this Period

0.93

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)

SCOFIELD, JOHN, , ,

**B.**

Mailing Address 4471 GREENWICH PKWY NW

City

WASHINGTON

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

S-3 GROUP

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 15 2025

Transaction ID : SA11AI.166710710

Amount of Each Receipt this Period

200.00

☐ Memo Item

IN-KIND: FUNDRAISING EXPENSES

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 03 2025

Transaction ID : SA11AI.165429565

Amount of Each Receipt this Period

26.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

200.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HAM, JAMES, , , III

**A.**

Mailing Address PO BOX 5106

City

LAKELAND

State

FL

Zip Code

33807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

J H HAM ENGINEERING INC

Occupation

ELECTRICAL ENGINEER

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 01 2025

Transaction ID : SA11AI.165430747

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 05 2025

Transaction ID : SA11AI.165509901

Amount of Each Receipt this Period

0.97

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 08 2025

Transaction ID : SA11AI.165582728

Amount of Each Receipt this Period

2.45

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

25.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 10 2025

Transaction ID : SA11AI.165662253

Amount of Each Receipt this Period

5.21

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 15 2025

Transaction ID : SA11AI.165781488

Amount of Each Receipt this Period

6510.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)  
BAKER, CALEB, , ,

Mailing Address 9305 JESUP LN

City  
BETHESDA

State  
MD

Zip Code  
20814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

C BAKER CONSULTING INC

CONSULTANT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 11 2025

Transaction ID : SA11AI.165781625

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED THROUGH WINRED  
DEBT RETIREMENT

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HIGDON, MICHAEL, , ,

**A.** Mailing Address 5117 BRADFORD DR

City

ANNANDALE

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

A19 STRATEGIES

Occupation

CONSULTANT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 11 2025

Transaction ID : SA11AI.165781627

Amount of Each Receipt this Period

2000.00

☐ Memo Item

EARMARKED THROUGH WINRED: SEE  
REDESIGNATION  
DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

HIGDON, MICHAEL, , ,

**B.** Mailing Address 5117 BRADFORD DR

City

ANNANDALE

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

A19 STRATEGIES

Occupation

CONSULTANT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 11 2025

Transaction ID : SA11AI.165781627.1

Amount of Each Receipt this Period

- 700.00

☒ Memo Item

REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

HIGDON, MICHAEL, , ,

**C.** Mailing Address 5117 BRADFORD DR

City

ANNANDALE

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

A19 STRATEGIES

Occupation

CONSULTANT

Receipt For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 11 2025

Transaction ID : SA11AI.165781627.2

Amount of Each Receipt this Period

700.00

☒ Memo Item

REDESIGNATION FROM PRIMARY

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

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

2000.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 OF 61

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

OLIVER, CHRISTIAN, , ,

**A.**

Mailing Address 2080 WILD ACRES RD

City

LARGO

State

FL

Zip Code

33771

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUESKY INNOVATIONS

Occupation

CEO

Receipt For: 2020



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 11 2025

Transaction ID : SA11AI.165781626.1

Amount of Each Receipt this Period

- 700.00



Memo Item

REDESIGNATION TO GENERAL

**B.**

Full Name (Last, First, Middle Initial)

OLIVER, CHRISTIAN, , ,

Mailing Address 2080 WILD ACRES RD

City

LARGO

State

FL

Zip Code

33771

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUESKY INNOVATIONS

Occupation

CEO

Receipt For: 2020



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 11 2025

Transaction ID : SA11AI.165781626.2

Amount of Each Receipt this Period

700.00



Memo Item

REDESIGNATION FROM PRIMARY

**C.**

Full Name (Last, First, Middle Initial)

OLIVER, CHRISTIAN, , ,

Mailing Address 2080 WILD ACRES RD

City

LARGO

State

FL

Zip Code

33771

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUESKY INNOVATIONS

Occupation

CEO

Receipt For: 2020



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 11 2025

Transaction ID : SA11AI.165781626

Amount of Each Receipt this Period

3500.00



Memo Item

EARMARKED THROUGH WINRED: SEE  
REDESIGNATION  
DEBT RETIREMENT

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

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

3500.00

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

PAGE 18 OF 61

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12  | 16  | 2025    |

Transaction ID : SA11AI.165847515

Amount of Each Receipt this Period

50.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED SEE ITEMIZED IF REQUIREDFull Name (Last, First, Middle Initial)  
BROWN, BERT, , ,

Mailing Address 2917 INDIAN CREEK DR

City  
BISHOPState  
CAZip Code  
93514FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

BROWNS SUPPLY INC

SALESMAN

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12  | 12  | 2025    |

Transaction ID : SA11AI.165849621

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)  
NELSON, CRAIG, , ,

Mailing Address 5306 WOOD TRAIL AVE NE

City  
CANTONState  
OHZip Code  
44705FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

TREMCO

ENGINEER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12  | 12  | 2025    |

Transaction ID : SA11AI.165849622

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

**A.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 18 2025

Transaction ID : SA11AI.165920970

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)  
LOPEZ, FAVIO, , ,

**B.** Mailing Address 7207 LAKETREE DR

City  
FAIRFAX STATION

State  
VA

Zip Code  
22039

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
EXECUTIVE

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 16 2025

Transaction ID : SA11AI.165921419

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED THROUGH WINRED  
DEBT RETIREMENT

Full Name (Last, First, Middle Initial)  
WINRED

**C.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 19 2025

Transaction ID : SA11AI.165953078

Amount of Each Receipt this Period

50.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**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 20 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MEYER, GARRETT, , ,

**A.**

Mailing Address 4308 BRAEMAR AVE

City

LAKELAND

State

FL

Zip Code

33813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
APPLIED MEDICALOccupation  
SALES

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 16  |   | 2025    |

Transaction ID : SA11AI.165953204

Amount of Each Receipt this Period

50.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 29  |   | 2025    |

Transaction ID : SA11AI.166088410

Amount of Each Receipt this Period

3500.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)

TUTTLE, DAVID, , ,

**C.**

Mailing Address 433 E NELSON AVE

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RUNE TECHNOLOGIESOccupation  
CEO

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 24  |   | 2025    |

Transaction ID : SA11AI.166088458

Amount of Each Receipt this Period

3500.00

☐ Memo ItemEARMARKED THROUGH WINRED: SEE  
REDESIGNATION  
DEBT RETIREMENT**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 3550.00 |
|---------|

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TUTTLE, DAVID, , ,

**A.**

Mailing Address 433 E NELSON AVE

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RUNE TECHNOLOGIES

Occupation

CEO

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 24 2025

Transaction ID : SA11AI.166088458.1

Amount of Each Receipt this Period

- 700.00

☒ Memo Item

REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

TUTTLE, DAVID, , ,

**B.**

Mailing Address 433 E NELSON AVE

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RUNE TECHNOLOGIES

Occupation

CEO

Receipt For: 2020

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 24 2025

Transaction ID : SA11AI.166088458.2

Amount of Each Receipt this Period

700.00

☒ Memo Item

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : SA11AI.166269487

Amount of Each Receipt this Period

501.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LANGLEY, THOMAS, , ,

**A.** Mailing Address 23229 SHINNECOCK HILLS DR

City  
ATHENS

State  
AL

Zip Code  
35613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LANGLEY CONSULTING

Occupation  
CONSULTANT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

Transaction ID : SA11AI.166269670

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 26 2025

Transaction ID : SA11AI.166276303

Amount of Each Receipt this Period

10.97

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)

WINRED

**C.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : SA11AI.166281875

Amount of Each Receipt this Period

250.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

**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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KIM, THOMAS, , ,

**A.**

Mailing Address 7009 ARBOR LN

City

MC LEAN

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THOMAS CAPITOL PARTNERS INC

Occupation

PRESIDENT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : SA11AI.166282702

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

77574.27

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : SA11AI.166299214

Amount of Each Receipt this Period

25.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)

HAM, JAMES, , , III

**C.**

Mailing Address PO BOX 5106

City

LAKELAND

State

FL

Zip Code

33807

FEC ID number of contributing  
federal political committee.

C

Name of Employer

J H HAM ENGINEERING INC

Occupation

ELECTRICAL ENGINEER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : SA11AI.166299259

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED THROUGH WINRED

DEBT RETIREMENT

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

275.00

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

13800.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AFLAC POLITICAL ACTION COMMITTEE (AFLAC PAC)**

Mailing Address 1932 WYNNTON RD

City  
COLUMBUS

State  
GA

Zip Code  
31999

FEC ID number of contributing  
federal political committee.

**C** C00034157

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 29 2025

Transaction ID : SA11C.166101905

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 7950 JONES BRANCH DRIVE  
400S

City  
MCLEAN

State  
VA

Zip Code  
22102

FEC ID number of contributing  
federal political committee.

**C** C00035451

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 29 2025

Transaction ID : SA11C.166101903

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 14600 TRINITY BLVD  
SUITE 500

City  
FORT WORTH

State  
TX

Zip Code  
76155-2512

FEC ID number of contributing  
federal political committee.

**C** C00267849

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : SA11C.166430255

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)..... ►

7500.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
AMENTUM SERVICES, INC. PAC

Mailing Address 300 M STREET, SE  
SUITE 400

City  
WASHINGTON

State  
DC

Zip Code  
20003

FEC ID number of contributing  
federal political committee.

C C00731414

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

Transaction ID : SA11C.166101933

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
AT&T INC. EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE (AT&T EMPLOYEE FEDERAL PAC)

Mailing Address 208 S. AKARD STREET  
SUITE 1812

City  
DALLAS

State  
TX

Zip Code  
75202

FEC ID number of contributing  
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : SA11C.166430253

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)

Mailing Address 2941 FAIRVIEW PARK DRIVE  
SUITE 100

City  
FALLS CHURCH

State  
VA

Zip Code  
22042

FEC ID number of contributing  
federal political committee.

C C00281212

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

Transaction ID : SA11C.166101934

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 26 OF 61

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

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BUILDING RENEWAL IN AMERICA NOW PAC****A.**

Mailing Address 1600 WEST LOOP S STE 2640

City  
HOUSTONState  
TXZip Code  
77027FEC ID number of contributing  
federal political committee.**C** C00589994

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 29  |   | 2025        |

Transaction ID : SA11C.166101911

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CONSERVATIVE OPPORTUNITY LEADERSHIP AND ENTERPRISE PAC (COLE PAC)****B.**

Mailing Address 12176 CHANCERY STATION CIR

City  
RESTONState  
VAZip Code  
20190FEC ID number of contributing  
federal political committee.**C** C00404392

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 29  |   | 2025        |

Transaction ID : SA11C.166101919

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC****C.**

Mailing Address 2980 FAIRVIEW PARK DRIVE

City  
FALLS CHURCHState  
VAZip Code  
22042FEC ID number of contributing  
federal political committee.**C** C00088591

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 29  |   | 2025        |

Transaction ID : SA11C.166101929

Amount of Each Receipt this Period

2500.00

☐ 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)

PAGE 27 OF 61

|                              |                              |   |                              |                             |
|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <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                           |                             |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HERMEUS CORPORATION PAC****A.**

Mailing Address 3960 DEKALB TECHNOLOGY PARKWAY

City  
ATLANTAState  
GAZip Code  
30340FEC ID number of contributing  
federal political committee.**C** C00823575

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2025        |

Transaction ID : SA11C.166430247

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT**Mailing Address 800 17TH ST NW  
STE 1100City  
WASHINGTONState  
DCZip Code  
20006FEC ID number of contributing  
federal political committee.**C** C00171330

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 29  |   | 2025        |

Transaction ID : SA11C.166101921

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WESTCity  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00096156

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  |   | 31  |   | 2025        |

Transaction ID : SA11C.166430249

Amount of Each Receipt this Period

500.00

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

2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City  
WASHINGTON

State  
DC

Zip Code  
20001

FEC ID number of contributing  
federal political committee.

**C** C00096156

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : SA11C.166430250

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 101 CONSTITUTION AVE. NW  
SUITE 500 WEST

City  
WASHINGTON

State  
DC

Zip Code  
20001

FEC ID number of contributing  
federal political committee.

**C** C00096156

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : SA11C.166430251

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**KRATOS DEFENSE & SECURITY SOLUTIONS, INC. POLITICAL ACTION COMMITTEE (KRATOS PAC)**

**C.**

Mailing Address 800 MAINE AVENUE SW  
7TH FLOOR

City  
WASHINGTON

State  
DC

Zip Code  
20024

FEC ID number of contributing  
federal political committee.

**C** C00686709

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

Transaction ID : SA11C.166101906

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)..... ►

4000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LEIDOS INC. POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 301 LABORATORY ROAD

City  
OAK RIDGE

State  
TN

Zip Code  
37830

FEC ID number of contributing  
federal political committee.

**C** C00546234

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

Transaction ID : SA11C.166101932

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 277 S WASHINGTON STREET  
STE 500

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

FEC ID number of contributing  
federal political committee.

**C** C00144766

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

Transaction ID : SA11C.166101926

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL BUSINESS AVIATION ASSOCIATION INC POLITICAL ACTION COMMITTEE (NBAA-PAC)**

**C.**

Mailing Address 1200 G STREET, NW  
SUITE 1100

City  
WASHINGTON

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C** C00319723

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : SA11C.166430252

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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

Mailing Address 1401 NEW YORK AVENUE NW SUITE 800

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00473652

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 18 2025

Transaction ID : SA11C.165948301

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NUCOR CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1915 REXFORD ROAD

City

CHARLOTTE

State

NC

Zip Code

28211-3441

FEC ID number of contributing  
federal political committee.

**C** C00379628

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : SA11C.166430246

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PUBLIX SUPER MARKETS, INC. ASSOCIATES POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 7093

City

LAKELAND

State

FL

Zip Code

33802

FEC ID number of contributing  
federal political committee.

**C** C00400705

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 10 2025

Transaction ID : SA11C.164785949

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)..... ►

6500.00

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RAPTOR PAC**

**A.**

Mailing Address PO BOX 4864

City  
MIDLAND

State  
TX

Zip Code  
79704

FEC ID number of contributing  
federal political committee.

**C** C00749481

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

**Transaction ID : SA11C.166101917**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC**

**B.**

Mailing Address 824 S MILLEDGE AVE, STE 101

City  
ATHENS

State  
GA

Zip Code  
30605

FEC ID number of contributing  
federal political committee.

**C** C00570226

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

**Transaction ID : SA11C.166101913**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC**

**C.**

Mailing Address 824 S MILLEDGE AVE, STE 101

City  
ATHENS

State  
GA

Zip Code  
30605

FEC ID number of contributing  
federal political committee.

**C** C00570226

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

**Transaction ID : SA11C.166101915**

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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TEXTRON INC. POLITICAL ACTION COMMITTEE**

**A.** Mailing Address 40 WESTMINSTER ST

City  
PROVIDENCE

State  
RI

Zip Code  
02903

FEC ID number of contributing  
federal political committee.

**C** C00123612

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 24 2025

Transaction ID : SA11C.166118607

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

1000.00

41500.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CHAIN BRIDGE BANK NA

**A.**

Mailing Address 1445-A LAUGHLIN AVE

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

11471.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2025

Transaction ID : SA15.165512775

Amount of Each Receipt this Period

1141.83



Memo Item

INTEREST REVENUE

Full Name (Last, First, Middle Initial)

CHAIN BRIDGE BANK NA

**B.**

Mailing Address 1445-A LAUGHLIN AVE

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

11471.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2025

Transaction ID : SA15.161967282

Amount of Each Receipt this Period

1198.77



Memo Item

INTEREST REVENUE

Full Name (Last, First, Middle Initial)

CHAIN BRIDGE BANK NA

**C.**

Mailing Address 1445-A LAUGHLIN AVE

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

11471.82

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 03 / 2025

Transaction ID : SA15.164953461

Amount of Each Receipt this Period

1210.50



Memo Item

INTEREST REVENUE

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

3551.10

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

3551.10

**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 34 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AI THOUGHT LEADERSHIP LLC**

Mailing Address 9509 BUNGALOW LN

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 04  |   | 2025    |

City  
AUSTINState  
TXZip Code  
78749

FEC Identification Number

**C**Purpose of Disbursement  
DONOR GIFT: BOOKS

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**800.00**

Transaction ID : SB17.1102180

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 08  |   | 2025    |

City  
FORT WORTHState  
TXZip Code  
76155

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**80.40**

Transaction ID : SB17.1102966

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 12  |   | 2025    |

City  
FORT WORTHState  
TXZip Code  
76155

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

**197.00**

Transaction ID : SB17.1104488

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**1077.40****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 35 OF 61

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

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NAME OF COMMITTEE (In Full)

SCOTT FRANKLIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE INTERNATIONAL INC.**

Mailing Address 205 PENNSYLVANIA AVE SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 18  |   | 2025    |

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.1103283

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. ARTEMIS FUNDRAISING STRATEGIES**

Mailing Address 4710 HOPEWELL MANOR DRIVE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 13  |   | 2025    |

City  
CUMMINGState  
GAZip Code  
30028

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.1096016

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. ARTEMIS FUNDRAISING STRATEGIES**

Mailing Address 4710 HOPEWELL MANOR DRIVE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 10  |   | 2025    |

City  
CUMMINGState  
GAZip Code  
30028

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.1103004

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

6500.00

**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 36 OF 61

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

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NAME OF COMMITTEE (In Full)

SCOTT FRANKLIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITAL CRAVINGS**

Mailing Address 2039 RAYBURN HOUSE OFFICE BUILDING

City  
WASHINGTONState  
DCZip Code  
20515Purpose of Disbursement  
EVENT EXPENSE: CATERING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  | / | 11  | / | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1178.16

Transaction ID : SB17.1103849

☐ Memo Item**B. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  | / | 23  | / | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

104.56

Transaction ID : SB17.1092479

☐ Memo Item**C. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  | / | 26  | / | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

104.88

Transaction ID : SB17.1100160

☐ Memo Item

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

1387.60

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 37 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 11  |   | 2025    |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

|       |
|-------|
| 25.00 |
|-------|

Transaction ID : SB17.1103627

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK, N.A.**

Mailing Address 1445-A LAUGHLIN AVENUE

City  
MCLEANState  
VAZip Code  
22101Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 19  |   | 2025    |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

|        |
|--------|
| 105.16 |
|--------|

Transaction ID : SB17.1105164

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. COLONIAL PARKING**

Mailing Address 701 9TH ST NW

City  
WASHINGTONState  
DCZip Code  
20001Purpose of Disbursement  
PARKING EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 19  |   | 2025    |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

|       |
|-------|
| 29.00 |
|-------|

Transaction ID : SB17.1098922

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

|        |
|--------|
| 159.16 |
|--------|

**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 38 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CONSTANT CONTACT**Mailing Address 1601 TRAPELO ROAD  
SUITE 329City  
WALTHAMState  
MAZip Code  
02451Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

10.63

Transaction ID : SB17.1088568

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONSTANT CONTACT**Mailing Address 1601 TRAPELO ROAD  
SUITE 329City  
WALTHAMState  
MAZip Code  
02451Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

10.63

Transaction ID : SB17.1096003

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONSTANT CONTACT**Mailing Address 1601 TRAPELO ROAD  
SUITE 329City  
WALTHAMState  
MAZip Code  
02451Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

10.63

Transaction ID : SB17.1101723

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

31.89

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

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

PAGE 39 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DC TASTE**

Mailing Address 2410 T ST NE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 22  |   | 2025    |

City  
WASHINGTONState  
DCZip Code  
20002

FEC Identification Number

**C**Purpose of Disbursement  
EVENT EXPENSE: FACILITY/CATERING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3662.56

Transaction ID : SB17.1092158

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. DELTA AIR LINES**

Mailing Address 1030 DELTA BOULEVARD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 03  |   | 2025    |

City  
ATLANTAState  
GAZip Code  
30354

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

533.49

Transaction ID : SB17.1096002

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. DEMOCRACY ENGINE**

Mailing Address 237 FLORIDA AVENUE NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 20  |   | 2025    |

City  
WASHINGTONState  
DCZip Code  
20001

FEC Identification Number

**C**Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.27

Transaction ID : SB17.1099814

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

4197.32

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

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

PAGE 40 OF 61

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

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NAME OF COMMITTEE (In Full)

SCOTT FRANKLIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. DEMOCRACY ENGINE**

Mailing Address 237 FLORIDA AVENUE NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 24  |   | 2025    |

City  
WASHINGTONState  
DCZip Code  
20001

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.1107086

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 4525 S FLORIDA AVE 2-5

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 14  |   | 2025    |

City  
LAKELANDState  
FLZip Code  
33813

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

42.76

Transaction ID : SB17.1090693

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 4525 S FLORIDA AVE 2-5

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 16  |   | 2025    |

City  
LAKELANDState  
FLZip Code  
33813

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

46.85

Transaction ID : SB17.1091020

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

129.61

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



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

PAGE 41 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 4525 S FLORIDA AVE 2-5

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10  | 16  | 2025    |

City  
LAKELANDState  
FLZip Code  
33813Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

42.58

Transaction ID : SB17.1091054

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 4525 S FLORIDA AVE 2-5

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 11  | 13  | 2025    |

City  
LAKELANDState  
FLZip Code  
33813Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

23.58

Transaction ID : SB17.1097667

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX**

Mailing Address 4525 S FLORIDA AVE 2-5

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 12  | 26  | 2025    |

City  
LAKELANDState  
FLZip Code  
33813Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

26.93

Transaction ID : SB17.1107406

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

93.09

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

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

PAGE 42 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FRANKLIN, SCOTT, , ,**

Mailing Address P.O. BOX 2811

City  
LAKELANDState  
FLZip Code  
33806Purpose of Disbursement  
REIMBURSEMENT: SEE ITEMIZED IF REQUIRED

Candidate Name

Office Sought: 

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

Disbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 11  |   | 2025    |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**787.36**

Transaction ID : SB17.1103244

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
TRAVEL: AIR

Candidate Name

Office Sought: 

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

Disbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 10  |   | 2025    |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**787.36**

Transaction ID : SB17.1103244.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOOKS SOLUTIONS, LLC**

Mailing Address PO BOX 15474

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought: 

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

Disbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 13  |   | 2025    |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**18135.29**

Transaction ID : SB17.1097310

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**18922.65****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 43 OF 61

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

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NAME OF COMMITTEE (In Full)

SCOTT FRANKLIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. INNOVATIVE INK**

Mailing Address 1840 HARDEN BLVD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 17  |   | 2025    |

City  
LAKELANDState  
FLZip Code  
33803

FEC Identification Number

C

Purpose of Disbursement  
PRINTING EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

68.29

Transaction ID : SB17.1105187

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. LINKEDIN**

Mailing Address 1000 WEST MAUDE AVENUE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 06  |   | 2025    |

City  
SUNNYVALEState  
CAZip Code  
94085

FEC Identification Number

C

Purpose of Disbursement  
SOFTWARE SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

55.77

Transaction ID : SB17.1096306

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. LINKEDIN**

Mailing Address 1000 WEST MAUDE AVENUE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 08  |   | 2025    |

City  
SUNNYVALEState  
CAZip Code  
94085

FEC Identification Number

C

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

55.77

Transaction ID : SB17.1102967

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

179.83

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

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

PAGE 44 OF 61

|  |                              |                              |                              |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" 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)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MBRF INC**

Mailing Address 1335 14TH ST NW

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
CATERING SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 2 | 2 | / | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**210.97**

Transaction ID : SB17.1106259

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OFFICE DEPOT**

Mailing Address 2527 FLORIDA AVE S

City  
LAKELANDState  
FLZip Code  
33803Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 2 | 3 | / | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**27.80**

Transaction ID : SB17.1106260

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ONE PARKING**

Mailing Address 1401 H ST NW

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
PARKING EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 2 | 1 | / | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**13.00**

Transaction ID : SB17.1101721

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**251.77****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 45 OF 61

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

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NAME OF COMMITTEE (In Full)

SCOTT FRANKLIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. RED CURVE SOLUTIONS**Mailing Address 138 CONANT STREET  
SUITE 401City  
BEVERLYState  
MAZip Code  
01915Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 2 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2066.26

Transaction ID : SB17.1087806

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RED CURVE SOLUTIONS**Mailing Address 138 CONANT STREET  
SUITE 401City  
BEVERLYState  
MAZip Code  
01915Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 6 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2026.84

Transaction ID : SB17.1095156

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RED CURVE SOLUTIONS**Mailing Address 138 CONANT STREET  
SUITE 401City  
BEVERLYState  
MAZip Code  
01915Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 5 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2014.60

Transaction ID : SB17.1100331

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

6107.70

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

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

PAGE 46 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RED CURVE SOLUTIONS**Mailing Address 138 CONANT STREET  
SUITE 401City  
BEVERLYState  
MAZip Code  
01915Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 29  |   | 2025    |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**2000.00**

Transaction ID : SB17.1100805

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCOFIELD, JOHN, , ,**

Mailing Address 4471 GREENWICH PARKWAY

City  
WASHINGTONState  
DCZip Code  
20007Purpose of Disbursement  
IN-KIND: FUNDRAISING EXPENSES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 15  |   | 2025    |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**200.00**

Transaction ID : SB17.1111811

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHUTTERFLY, INC**

Mailing Address 2800 BRIDGE PKWY

City  
REDWOOD CITYState  
CAZip Code  
94065Purpose of Disbursement  
PRINTING EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 02  |   | 2025    |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

**725.45**

Transaction ID : SB17.1101722

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**2925.45****TOTAL** This Period (last page this line number only).....▶

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

PAGE 47 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SHUTTERFLY, INC**

Mailing Address 2800 BRIDGE PKWY

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 18  |   | 2025    |

City  
REDWOOD CITYState  
CAZip Code  
94065

FEC Identification Number

**C**Purpose of Disbursement  
PRINTING EXPENSE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

469.51

Transaction ID : SB17.1105186

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. STREAMSONG RESORT**

Mailing Address 1000 STREAMSONG DR

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 22  |   | 2025    |

City  
BOWLING GREENState  
FLZip Code  
33834

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL: LODGING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.1105418

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. UNITED STATES POSTAL SERVICE**

Mailing Address 2800 LAKELAND HILLS BLVD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 16  |   | 2025    |

City  
LAKELANDState  
FLZip Code  
33805

FEC Identification Number

**C**Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

468.00

Transaction ID : SB17.1104614

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

4937.51

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

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

PAGE 48 OF 61

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

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UNITED STATES POSTAL SERVICES**

Mailing Address 475 L'ENFANT PLAZA SW

City  
WASHINGTONState  
DCZip Code  
20260Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 | / | 2 | 4 | / | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

93.96

Transaction ID : SB17.1107405

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VERIZON WIRELESS**

Mailing Address 1095 AVENUE OF THE AMERICAS

City  
NEW YORKState  
NYZip Code  
10036Purpose of Disbursement  
MOBILE PHONE EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

97.08

Transaction ID : SB17.1090385

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VERIZON WIRELESS**

Mailing Address 1095 AVENUE OF THE AMERICAS

City  
NEW YORKState  
NYZip Code  
10036Purpose of Disbursement  
MOBILE PHONE EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Category/  
Type

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 1 | 4 | / | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

97.12

Transaction ID : SB17.1097702

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

288.16

**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 49 OF 61

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

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NAME OF COMMITTEE (In Full)

SCOTT FRANKLIN FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address 1095 AVENUE OF THE AMERICAS

City  
NEW YORKState  
NYZip Code  
10036Purpose of Disbursement  
MOBILE PHONE EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

97.12

Transaction ID : SB17.1104536

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For: 2020

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 3 | / | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.04

Transaction ID : SB17.1088001

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

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

Disbursement For: 2020

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | / | 0 | 3 | / | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.84

Transaction ID : SB17.1088330

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

108.00

**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 50 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 08  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.04

Transaction ID : SB17.1089179

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 16  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.37

Transaction ID : SB17.1090783

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 22  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.39

Transaction ID : SB17.1092074

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

2.80

**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 51 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 24  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.94

Transaction ID : SB17.1092503

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 29  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.06

Transaction ID : SB17.1093968

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 03  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.04

Transaction ID : SB17.1094984

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

4.04

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

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

PAGE 52 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.99

Transaction ID : SB17.1095838

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 06  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.04

Transaction ID : SB17.1096108

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 12  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.03

Transaction ID : SB17.1096933

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

1.06

**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 53 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.40

Transaction ID : SB17.1097453

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

21.67

Transaction ID : SB17.1098508

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 1 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.19

Transaction ID : SB17.1098942

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

24.26

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

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

PAGE 54 OF 61

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

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 4 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.42

Transaction ID : SB17.1099229

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
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| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.03

Transaction ID : SB17.1099898

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 0 | 3 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.1101487

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

1.48

**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 55 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 05  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.03

Transaction ID : SB17.1102095

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 08  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.08

Transaction ID : SB17.1102424

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 10  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.21

Transaction ID : SB17.1103070

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

0.32

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

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

PAGE 56 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 15  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

256.49

Transaction ID : SB17.1103943

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 16  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.98

Transaction ID : SB17.1104257

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 12  |   | 18  |   | 2025    |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : SB17.1104859

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

297.87

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



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

PAGE 57 OF 61

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

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NAME OF COMMITTEE (In Full)

**SCOTT FRANKLIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.97

Transaction ID : SB17.1105257

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

137.90

Transaction ID : SB17.1106537

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

0.42

Transaction ID : SB17.1107839

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

140.29

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

47769.26

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 58 OF 61

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4704

SCOTT FRANKLIN FOR CONGRESS

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

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

FRANKLIN, SCOTT MR., , ,

Mailing Address

P.O. BOX 2811

City

LAKELAND

State

FL

ZIP Code

33806

☒ Personal Funds of the Candidate

Original Amount of Loan

140000.00

Cumulative Payment To Date

90000.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
06 30 / 2020

M M / D D / Y Y Y Y

12/31/2020

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

50000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 59 OF 61

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4844

SCOTT FRANKLIN FOR CONGRESS

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

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

FRANKLIN, SCOTT MR., , ,

Mailing Address

P.O. BOX 2811

City

LAKELAND

State

FL

ZIP Code

33806

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
07 / 29 / 2020M M / D D / Y Y Y Y  
/ / 12/31/2020Y Y Y Y  
12/31/2020

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

50000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 60 OF 61

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.6590

SCOTT FRANKLIN FOR CONGRESS

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

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

FRANKLIN, SCOTT MR., , ,

Mailing Address

P.O. BOX 2811

City

LAKELAND

State

FL

ZIP Code

33806

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
08 10 / 2020M M / D D / Y Y Y Y  
12/31/2020

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

50000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 61 OF 61

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.9253

SCOTT FRANKLIN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼

FRANKLIN, SCOTT MR., , ,

Mailing Address

P.O. BOX 2811

City

LAKELAND

State

FL

ZIP Code

33806

☒ Personal Funds of the Candidate

Original Amount of Loan

150000.00

Cumulative Payment To Date

1500.00

Balance Outstanding at Close of This Period

148500.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
10 19 / 2020M M / D D / Y Y Y Y  
12/31/2020

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

148500.00

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

298500.00

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