

**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

LANGWORTHY FOR CONGRESS

ADDRESS (number and street)

PO BOX 120

Check if different  
than previously  
reported. (ACC)

CLARENCE

NY

14031-0120

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00817932

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

NY

23

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

04

D D /

01

Y Y Y Y /

2025

through

M M /

06

D D /

30

Y Y Y Y /

2025

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

Type or Print Name of Treasurer

BROGHAMER, KEVIN, , ,

Signature of Treasurer

BROGHAMER, KEVIN, , ,

Date

M M /

07

D D /

14

Y Y Y Y /

2025

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

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**LANGWORTHY FOR CONGRESS**

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

MM / DD / YYYY  
06 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	306050.62	699444.94
(b) Total Contribution Refunds (from Line 20(d)) .....	10.10	2060.14
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	306040.52	697384.80
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	88551.81	272185.42
(b) Total Offsets to Operating Expenditures (from Line 14) .....	710.91	3830.54
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	87840.90	268354.88
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	1554701.02	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**LANGWORTHY FOR CONGRESS**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2025 To: M M / D D / Y Y Y Y 06 / 30 / 2025

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	107284.00	304189.04
(ii) Unitemized .....	13167.61	30364.89
(iii) TOTAL of contributions from individuals .....	120451.61	334553.93
(b) Political Party Committees.....	3650.00	4147.00
(c) Other Political Committees (such as PACs) .....	181949.01	360744.01
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	306050.62	699444.94
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	4000.00	76303.40
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	710.91	3830.54
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	- 3136.26	6291.25
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	307625.27	785870.13

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	88551.81	272185.42
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	10.10	310.14
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	1750.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	10.10	2060.14
21. OTHER DISBURSEMENTS .....	90000.00	90000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	178561.91	364245.56

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1425637.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	307625.27
25. SUBTOTAL (add Line 23 and Line 24).....	1733262.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	178561.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1554701.02

**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 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ANDERSON, JOSEPH, M., , JR.

**A.**

Mailing Address 2293 SAUNDERS SETTLEMENT RD

City

SANBORN

State

NY

Zip Code

14132-9162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SMOKIN JOES

Occupation

RETAIL

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	5	

Transaction ID : AABC0017EA2F44179B6B

Amount of Each Receipt this Period

- 500.00

☒ Memo Item

REDESIGNATION FROM

**B.**

Full Name (Last, First, Middle Initial)

ANDERSON, JOSEPH, M., , JR.

Mailing Address 2293 SAUNDERS SETTLEMENT RD

City

SANBORN

State

NY

Zip Code

14132-9162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SMOKIN JOES

Occupation

RETAIL

Receipt For: 2026

☐

Primary

☒

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	5	

Transaction ID : A7A9D2C87E9D044BDB81

Amount of Each Receipt this Period

500.00

☒ Memo Item

REDESIGNATION TO

**C.**

Full Name (Last, First, Middle Initial)

ANDERSON, JOSEPH, M., , JR.

Mailing Address 2293 SAUNDERS SETTLEMENT RD

City

SANBORN

State

NY

Zip Code

14132-9162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SMOKIN JOES

Occupation

RETAIL

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	5	

Transaction ID : AE103258C4200406CB0F

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SEE REDESIGNATION

**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 6 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	5	

Transaction ID : A258702C7D1904FFE9E9

Amount of Each Receipt this Period

3500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

ARNOLD, EDWARD, J., ,

Mailing Address 140 SUMMERSHADE CT

City

EAST AMHERST

State

NY

Zip Code

14051-1678

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

TCIA

OWNER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A9AB6331D9EE54D6F82F

Amount of Each Receipt this Period

200.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

ARTHUR, BRADLEY, J., ,

Mailing Address 20 HUNT CLUB CIR  
APT A

City

EAST AMHERST

State

NY

Zip Code

14051-1789

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

BLACK ROCK PHARMACY

PHARMACIST

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : ABB032A908EF04991AB3

Amount of Each Receipt this Period

100.00



Memo Item

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

300.00

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

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

PAGE 7 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ARTHUR, DONALD, W., , JR.

**A.**

Mailing Address 47 DAVINCI CT

City

WILLIAMSVILLE

State

NY

Zip Code

14221-2771

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BRIGHTON EGGERT PHARMACYOccupation  
RPH - OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 26 2025

Transaction ID : A2F472DEBE13A42F4B78

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 26 2025

Transaction ID : AA9E8DD93F91F490286E

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ARTHUR, DONALD, W., , JR.

**C.**

Mailing Address 47 DAVINCI CT

City

WILLIAMSVILLE

State

NY

Zip Code

14221-2771

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BRIGHTON EGGERT PHARMACYOccupation  
RPH - OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 26 2025

Transaction ID : A303815EDD7EB4041884

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2025D D / Y Y Y Y Y  
26 / 2025Y Y Y Y Y  
2025

Transaction ID : AF529F64B970F4CC18D6

Amount of Each Receipt this Period

100.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

BALMAS, CARL, M., ,

Mailing Address 143 BROCKMOORE DR

City

EAST AMHERST

State

NY

Zip Code

14051-2138

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : A2F39FBD770CE4618966

Amount of Each Receipt this Period

100.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

BARNES, PHILIP, , ,

Mailing Address 203 LAKEVIEW AVE

City

WATKINS GLEN

State

NY

Zip Code

14891-1114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 10 / 2025D D / Y Y Y Y Y  
10 / 2025Y Y Y Y Y  
2025

Transaction ID : A69B89AEFE4CE4461837

Amount of Each Receipt this Period

250.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

350.00

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 9 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A75E1E0A4B06042228A4

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

BERNACKI, THOMAS, M., ,

Mailing Address 7 SAND BROOK RD

City

PITTSFORD

State

NY

Zip Code

14534-3517

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HIRSCH &amp; TUBIOLO

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AAA3D7773309D4FC49E1

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

BLACK, KYLE, , ,

Mailing Address 741 BIRDSEY ROAD

City

WATERLOO

State

NY

Zip Code

13165-9620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SENECA MEADOWS INC

Occupation

DISTRICT MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AC7B5DEA838CF45399DA

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1250.00

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

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

PAGE 10 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A2FEC694CD19E433AADC

Amount of Each Receipt this Period

250.00



Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

BOARDWAY, JAY, P., ,

Mailing Address 6530 FAIRLANE DR

City

BOSTON

State

NY

Zip Code

14025-9637

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

LOSI GANGI

LAWYER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AA28F1590F4434B6C8C8

Amount of Each Receipt this Period

500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A81E29B3A6F4E4C94915

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

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

500.00

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

PAGE 11 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BOBICK, MICHAEL, P., ,

**A.**

Mailing Address 460 RIVERVIEW DR

City

YOUNGSTOWN

State

NY

Zip Code

14174-1388

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STUDENTOccupation  
STUDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A2A59A133177C4D379CB

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BOCKETTI, BRIAN, , ,

**B.**

Mailing Address 180 DONCASTER RD

City

BUFFALO

State

NY

Zip Code

14217-2155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIPPES MATHIASOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A7308D9778A504808870

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BOSCO, EDWARD, , ,

**C.**

Mailing Address 26 ORCHARD RIDGE RD

City

CHAPPAQUA

State

NY

Zip Code

10514-2712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ME ENGINEERSOccupation  
ENGINEER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A7DB6817A9A6747FF909

Amount of Each Receipt this Period

250.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
AMERICAN COUNCIL OF ENGINEERING**SUBTOTAL** of Receipts This Page (optional)..... ▶

1500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC PAC)**Mailing Address 1400 L ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20005-3592FEC ID number of contributing  
federal political committee.**C** C00010868

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID : AD010CE8BDAA14E788EC

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

**B. BROGOWSKI, GENE, , ,**

Mailing Address 9785 LAPP RD

City  
CLARENCE CENTERState  
NYZip Code  
14032-9686FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

ICE

SALES

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : AC5879AB2EC03429BA3F

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CARD, BRAD, , ,**

Mailing Address 15356 FIDDLESTICKS BLVD

City  
FORT MYERSState  
FLZip Code  
33912-3925FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

CHARTWELL STRATEGY GROUP

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A6C5F3D6AC8DD42FB999

Amount of Each Receipt this Period

1500.00

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

1700.00

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

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

PAGE 13 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CARD, BRAD, , ,

**A.**

Mailing Address 15356 FIDDESTICKS BLVD

City

FORT MYERS

State

FL

Zip Code

33912-3925

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHARTWELL STRATEGY GROUP

Occupation

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AC466744803AE4C97ABB

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CASILIOBLUHM, CHRISSEY, , ,

Mailing Address 9824 LONGLEAF TRAIL

City

CLARENCE

State

NY

Zip Code

14031-1845

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CASILIO COMMUNICATIONS

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

399.00

Date of Receipt

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

Transaction ID : A5C1144F62B8140A9B0F

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : AF8F38A73D35C48509A0

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

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

1100.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CASILIOBLUHM, CHRISSY, , ,

**A.** Mailing Address 9824 LONGLEAF TRAILCity  
CLARENCEState  
NYZip Code  
14031-1845FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CASILIO COMMUNICATIONSOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

399.00

Date of Receipt

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

Transaction ID : A2983E4F7861F46FF98D

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

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

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : AEA8FDC8A5B12452F91A

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

CHOE, YONG, , ,

**C.** Mailing Address 45 SUTTON SQ SW UNIT 806City  
WASHINGTONState  
DCZip Code  
20024-3486FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YC CONSULTING, LLCOccupation  
CONSULTING

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A410F4BF15D7E48BA993

Amount of Each Receipt this Period

1500.00

☐ Memo Item

1600.00

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

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

PAGE 15 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CLARK, WAYNE, A., ,

**A.**

Mailing Address 1121 RICE RD

City  
ELMAState  
NYZip Code  
14059-9254FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOWN OF ELMAOccupation  
TOWN SUPERVISOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : A8E2D4270833544E6A1A

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CORTESE, WILLIAM, , , JR.

**B.**

Mailing Address 4012 PARK AVE

City  
WILMINGTONState  
NCZip Code  
28403-6825FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MERCURYOccupation  
SENIOR VICE PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : AC29763AD5B6944FA921

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CUMMINGS, ROY, W., , III

**C.**

Mailing Address 221 PROSPECT HILL RD

City  
HORSEHEADSState  
NYZip Code  
14845-7979FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE DUNN GROUPOccupation  
INSURANCE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 24 2025

Transaction ID : A921643E13FDB4C82B80

Amount of Each Receipt this Period

250.00

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

850.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CZARNIK, CHRISTINE, , ,

**A.**

Mailing Address 76 WORTH ST

City

BUFFALO

State

NY

Zip Code

14223-2350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAROLINA FIRST TAX ACCOUNTING

Occupation

ACCOUNTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

Transaction ID : A0A513FC1888C4AF1BE3

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

Transaction ID : A0E3466D774C647A5BD2

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

DAMIANI, LISA, A., ,

**C.**

Mailing Address 69 KINGSGATE RD

City

BUFFALO

State

NY

Zip Code

14226-4540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOLA STRATEGIES MANAGEMENT

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : AAA0553AC79A943968D5

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

200.00

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



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

PAGE 17 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : AA3158838F5254C1D9EF

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

DARA, KHURRAM, , ,

Mailing Address 240 MEEKER AVE

City

BROOKLYN

State

NY

Zip Code

11211-2272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

BAIN CAPITAL

ATTORNEY

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	5	

Transaction ID : A4489CAEC09434534840

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	5	

Transaction ID : A689AC18148624B82950

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

1000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DEGEORGE, JOSEPH, R., ,

**A.**

Mailing Address 3062 GUYANOGA RD

City

BRANCHPORT

State

NY

Zip Code

14418-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ST. PAULY TEXTILEOccupation  
FOUNDER, CHAIRMAN & CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A29ECBA473FF44A6C998

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DERDERIAN, JAMES, , ,

**B.**

Mailing Address 182 PRINCE GEORGE ST

City

ANNAPOLIS

State

MD

Zip Code

21401-1724

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE STANTON PARK GROUPOccupation  
CONSULTANT

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  
06 10 2025

Transaction ID : AAB1CFDA824124C07BB7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DEROSAS, ANDREA, L., ,

**C.**

Mailing Address 77 MIDDLEBURY RD

City

ORCHARD PARK

State

NY

Zip Code

14127-3580

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BUFFALO PSYCHIATRIC CENTEROccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

398.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 28 2025

Transaction ID : A579EF9AFA05E404ABDE

Amount of Each Receipt this Period

200.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4700.00

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

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<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	5

Transaction ID : A30D187E6C6504B06896

Amount of Each Receipt this Period

200.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

DEWYSOCKI, DOUGLAS, , ,

Mailing Address 2525 DANIELLE DR

City

NIAGARA FALLS

State

NY

Zip Code

14304-4626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JACK HUNT COIN BROKER

Occupation

GENERAL MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	5

Transaction ID : ABE172CEBED904821BCD

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	5

Transaction ID : A65BF72F3D6144D64ABE

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

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

250.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DIFFELL, BRIAN, , ,

**A.**

Mailing Address 7283 HIGHLAND ESTATES PL

City

FALLS CHURCH

State

VA

Zip Code

22043-3008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RIDGE PATH STRATEGIES

Occupation

FOUNDER

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  
06 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : A4D32F43580FF4BEDB23

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DIMARCO, GERARD, D., ,

**B.**Mailing Address 2 STATE ST  
STE 975

City

ROCHESTER

State

NY

Zip Code

14614-1331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAWYER

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  
06 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : A7A021AA4B2A14561814

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DIPIZIO, BERNARD, , ,

**C.**

Mailing Address 100 STRADTMAN ST

City

CHEEKTOWAGA

State

NY

Zip Code

14206-2635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CONTRACTOR

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2025D D / Y Y Y Y Y  
30 / 2025Y Y Y Y Y  
2025

Transaction ID : A59F4D453F7DB44F3AF9

Amount of Each Receipt this Period

950.00

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

2450.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DITTENBER, DAVID, E., ,

**A.** Mailing Address 3210 CONESTOGA CTCity  
MIDLANDState  
MIZip Code  
48642-9779FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
RESTAURATEUR

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  
06 30 2025

Transaction ID : A10E0FC2C519540F3B7D

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DONALD SPOTH FARM

**B.** Mailing Address 2715 TONAWANDA CREEK RDCity  
AMHERSTState  
NYZip Code  
14228-1430FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID : A2E6FF14C43494FBA872

Amount of Each Receipt this Period

2000.00

☐ Memo Item

SEE PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

SPOTH, DONALD, , ,

**C.** Mailing Address 2715 TONAWANDA CREEK RDCity  
AMHERSTState  
NYZip Code  
14228-1430FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DONALD SPOTH FARMOccupation  
OWNER

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID : A8576CAF7AAE145E9A95

Amount of Each Receipt this Period

2000.00

☒ Memo Item

PARTNERSHIP: DONALD SPOTH FARM

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

4500.00

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

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<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DONDORFER, PAUL, E., ,

**A.**

Mailing Address 68 WOODSIDE DR

City

PENFIELD

State

NY

Zip Code

14526-2240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CITY OF ROCHESTER

Occupation

INVESTIGATOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A81D9830E141849B1834

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DZIEDZIC, RAYMOND, J., ,

**B.**

Mailing Address 4746 WOODSIDE AVE

City

HAMBURG

State

NY

Zip Code

14075-4054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

299.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

Transaction ID : ABF728482E3BC455B83C

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELLIOTT, ERIN, , ,

**C.**

Mailing Address 2119 TEN EYCK AVE

City

CAZENOVIA

State

NY

Zip Code

13035-9754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HILLEAST GROUP

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A05863ABE5E1F42F6A0C

Amount of Each Receipt this Period

1500.00

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

2600.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

EVERS, JOHN, , ,

**A.**

Mailing Address 400 GREENWAY

City  
ALBANYState  
NYZip Code  
12208-1418FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACEC NEW YORKOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 10 2025

Transaction ID : ADDF2158B0CF04A69808

Amount of Each Receipt this Period

500.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
AMERICAN COUNCIL OF ENGINEERING**B.**

Full Name (Last, First, Middle Initial)

AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC PAC)

Mailing Address 1400 L ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20005-3592FEC ID number of contributing  
federal political committee.

C C00010868

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 10 2025

Transaction ID : ABCA58E03EECC4BD8A58

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

FASO, JOHN, , ,

Mailing Address PO BOX 474

City  
KINDERHOOKState  
NYZip Code  
12106-0474FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

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  
05 16 2025

Transaction ID : A333BBB7F9C224161BE8

Amount of Each Receipt this Period

500.00

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FISCHER, JOHN, , ,

**A.**

Mailing Address 51 MEADOW COVE RD

City

PITTSFORD

State

NY

Zip Code

14534-3350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FIDELITY INVESTMENTS

Occupation

FINANCIAL ADVISOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	5	

Transaction ID : AA2E6A0273EAB45CE87D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FISCHER, ROBERT, , ,

**B.**

Mailing Address 51 MEADOW COVE RD

City

PITTSFORD

State

NY

Zip Code

14534-3350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FISCHER INVESTMENT GROUP, INC.

Occupation

INVESTMENT ADVISOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	5	

Transaction ID : A2E840B560FE94B6D984

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FISHER, JEFFREY, , ,

**C.**Mailing Address 515 E 72ND ST  
APT 30F

City

NEW YORK

State

NY

Zip Code

10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOURO UNIVERSITY

Occupation

SPECIAL PROGRAMS ADMINISTRATOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : ABC56E6B7332C439DA86

Amount of Each Receipt this Period

500.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
AMERICAN ISRAELI PUBLIC AFFAIRS COMMITTEE**SUBTOTAL** of Receipts This Page (optional)..... ▶

5000.00

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



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

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<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC (AIPAC)**

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2604

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3260.44

Date of Receipt

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

Transaction ID : A3A40CCD55CEC410387E

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

**FOSTER, BEHREND, , ,**

Mailing Address 1722 N NELSON ST

City

ARLINGTON

State

VA

Zip Code

22207-3643

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

Name of Employer

BLUESTONE STRATEGIES

Occupation

GOVT AFFAIRS REP

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AA225FE50C87647A6A0F

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**FRAZEE, ELIZABETH, , ,**

Mailing Address 6313 EVERMAY DR

City

MCLEAN

State

VA

Zip Code

22101-2309

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

Name of Employer

TWINLOGIC STRATEGIES, LLP

Occupation

CONSULTANT/ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA31379EE9A3847B6A78

Amount of Each Receipt this Period

1000.00

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

1500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FREY, LAURIE, A., ,

**A.** Mailing Address 5329 GREEN VALLEY DRCity  
CLARENCEState  
NYZip Code  
14031-1232FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FREY ELECTRIC CONSTRUCTION CO.Occupation  
MARKETING DIRECTOR

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 24 2025

Transaction ID : A570EE8CB6E594E20991

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FROGUE, JAMES, , ,

**B.** Mailing Address 1222 NORTH MEADE  
18City  
ARLINGTONState  
VAZip Code  
22209-3701FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FROGUECLARKOccupation  
CONSULTANT

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  
06 26 2025

Transaction ID : AB981D5A48D03401695F

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GENTILE, BRADLEY, , ,

**C.** Mailing Address 1500 D ST SECity  
WASHINGTONState  
DCZip Code  
20003-2438FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL EAST GROUP, LLCOccupation  
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : AB7D9F8DFABA6440DAA2

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SEE REDESIGNATION

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

8500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GENTILE, BRADLEY, , ,

**A.**

Mailing Address 1500 D ST SE

City

WASHINGTON

State

DC

Zip Code

20003-2438

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HILL EAST GROUP, LLC

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : AEA8C4C938C174010A37

Amount of Each Receipt this Period

- 500.00

☒ Memo Item

REDESIGNATION FROM

Full Name (Last, First, Middle Initial)

GENTILE, BRADLEY, , ,

**B.**

Mailing Address 1500 D ST SE

City

WASHINGTON

State

DC

Zip Code

20003-2438

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HILL EAST GROUP, LLC

Occupation

CONSULTANT

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : A028F4AB287254F46B0D

Amount of Each Receipt this Period

500.00

☒ Memo Item

REDESIGNATION TO

Full Name (Last, First, Middle Initial)

GIBLIN, CHRISTOPHER, , ,

**C.**

Mailing Address 1304 CHANCEL PL

City

ALEXANDRIA

State

VA

Zip Code

22314-4707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OGR

Occupation

GOVERNMENT RELATIONS

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  
06 10 2025

Transaction ID : AFF68D38F9F5B4B41B3A

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

500.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GIOIA, ANTHONY, H., ,

**A.**

Mailing Address 925 DELAWARE AVENUE, APT. 7D

City

BUFFALO

State

NY

Zip Code

14209-1868

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A829576EC32CD4749A85

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A66ECC6DD992E4234BE3

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

GIROUX, STEPHEN, L., ,

**C.**

Mailing Address 9034 RIDGE RD

City

GASPORT

State

NY

Zip Code

14067-9408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MIDDLEPORT FAMILY HEALTH CTR

Occupation

PHARMACIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1299.00

Date of Receipt

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

Transaction ID : ADDA7C4D29A8C4F30B5B

Amount of Each Receipt this Period

100.00

☐ Memo Item

1100.00

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

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

PAGE 29 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GREINER, ROBERT, J., ,

**A.**

Mailing Address 7736 COLE RD

City  
COLDENState  
NYZip Code  
14033-9728FEC ID number of contributing  
federal political committee.

C

Name of Employer  
4TH WAVE TECHNOLOGIES LLCOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2025

Transaction ID : A789DDC13635A44A8887

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GRIFFIN, DREW, , ,

**B.**

Mailing Address 2209 SHERWOOD HALL LN

City  
ALEXANDRIAState  
VAZip Code  
22306-2743FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INVARIANTOccupation  
GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 28 / 2025

Transaction ID : AA246468ED13E4F55965

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

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

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y  
06 / 28 / 2025

Transaction ID : A321C28687AB144A8B83

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

1250.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GUTCHESS, TYLER, , ,

**A.**Mailing Address 1600 S JOYCE ST  
APT 906City  
ARLINGTONState  
VAZip Code  
22202-5119FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILLEAST GROUPOccupation  
CONSULTANT

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  
06 23 2025

Transaction ID : A4A2C4F4FD8524C82959

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HARLOCK, KEITH, , ,

**B.**

Mailing Address 1925 EASTWOOD RD

City  
EAST AURORAState  
NYZip Code  
14052-9675FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WSP USAOccupation  
ENGINEER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 21 2025

Transaction ID : A3E10902DFEB9402C95D

Amount of Each Receipt this Period

300.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
AMERICAN COUNCIL OF ENGINEERING

Full Name (Last, First, Middle Initial)

AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC PAC)

**C.**Mailing Address 1400 L ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20005-3592FEC ID number of contributing  
federal political committee.

C C00010868

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 21 2025

Transaction ID : AFED1E36FACE5467C869

Amount of Each Receipt this Period

300.00

☒ Memo Item

INTERMEDIARY

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

1800.00

**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 31 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HEALY, DWIGHT, M., ,

**A.** Mailing Address PO BOX 23City  
BELMONTState  
NYZip Code  
14813-0023FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

705.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : A10934D9A2FAF4227BAD

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HEBERLING, MARK, , ,

**B.** Mailing Address 1676 ROGERS RDCity  
FRANKLINVILLEState  
NYZip Code  
14737-9544FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1149.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : AD71A91A6CABC42319D7

Amount of Each Receipt this Period

950.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HOREY, STONER, E., , MD

**C.** Mailing Address 3461 PIERCE RDCity  
CANISTEOState  
NYZip Code  
14823-9612FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		24		2025

Transaction ID : AE942980D24154923929

Amount of Each Receipt this Period

250.00

☐ Memo Item

1700.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOWELL, ZACHARY, , ,

**A.** Mailing Address 9831 HOLLOW GLEN PLCity  
SILVER SPRINGState  
MDZip Code  
20910-1139FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL EAST GROUPOccupation  
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	5	

Transaction ID : AA55A04A4E5664D62BE5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUFF, ALAN, M., , SR.

**B.** Mailing Address 224 W MAPLEMERE RDCity  
BUFFALOState  
NYZip Code  
14221-3156FEC ID number of contributing  
federal political committee.

C

Name of Employer  
A & L MOVINGOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A518E2E2300534B62817

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

IRISH, MARCIA, J., ,

**C.** Mailing Address 5048 BROOKHAVEN DRCity  
CLARENCEState  
NYZip Code  
14031-1610FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IRISH COMPANIESOccupation  
CHAIR OF THE BOARD

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A7E57380834F74FD9B5F

Amount of Each Receipt this Period

500.00

☐ Memo Item

1550.00

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



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

PAGE 33 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JENSEN, AMY, , ,

**A.**

Mailing Address 424 N SAINT ASAPH ST

City

ALEXANDRIA

State

VA

Zip Code

22314-2318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPLITOAK STRATEGIES

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AAB962CD3E3E74DA89B9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A24C2B5819B624FB3879

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

JOHNSON, TRAVIS, , ,

**C.**

Mailing Address 5640 19TH ST N

City

ARLINGTON

State

VA

Zip Code

22205-3152

FEC ID number of contributing  
federal political committee.

C

Name of Employer

1607 STRATEGIES

Occupation

GOVT AFFAIRS

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

Transaction ID : ACF2F814A1A5A4D769D1

Amount of Each Receipt this Period

3500.00

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

4500.00

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

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

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<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KANE, TIMOTHY, , ,

**A.**

Mailing Address 66 RUSKIN RD

City  
SNYDERState  
NYZip Code  
14226-4254FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOAOccupation  
FINANCIAL ADVISOR

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  
06 25 2025

Transaction ID : A4B415F8779924475B51

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

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

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y Y  
06 25 2025

Transaction ID : A96CA7C895D8847EAAA2

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

KARNEY, MARISSA, , ,

**C.**

Mailing Address 2760 KENMORE AVE

City  
TONAWANDAState  
NYZip Code  
14150-7707FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MONTANTE GROUPOccupation  
EXECUTIVE ASSISTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 12 2025

Transaction ID : A53627F5F913D4995B73

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

600.00

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

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

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

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NAME OF COMMITTEE (In Full)

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

Mailing Address PO BOX 9891

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

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y Y  
06 12 2025

Transaction ID : A2ADEF67EBB04673904

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

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

Mailing Address 2760 KENMORE AVE

City  
TONAWANDAState  
NYZip Code  
14150-7707FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MONTANTE GROUP

EXECUTIVE ASSISTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 12 2025

Transaction ID : A55B98AC39646426DA5E

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

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

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y Y  
06 12 2025

Transaction ID : A584A0F9CBCBF4026880

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

100.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KARNEY, MARISSA, , ,

**A.** Mailing Address 2760 KENMORE AVE

City

TONAWANDA

State

NY

Zip Code

14150-7707

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MONTANTE GROUPOccupation  
EXECUTIVE ASSISTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
06		12		2025	

Transaction ID : A0ABB5394A78C4A96828

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
06		12		2025	

Transaction ID : A42DE22B9F8CE4A318CA

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

KELLEY, STEPHEN, M., ,

**C.** Mailing Address 15 AVON RD  
PO BOX 279

City

GENESE0

State

NY

Zip Code

14454-1001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : A603D7FA26FFC4AA6BBC

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SEE REDESIGNATION

3600.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KELLEY, STEPHEN, M., ,

**A.**Mailing Address 15 AVON RD  
PO BOX 279City  
GENESE0State  
NYZip Code  
14454-1001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : AA7EBE642B0F248A1AA6

Amount of Each Receipt this Period

- 500.00

☒ Memo Item

REDESIGNATION FROM

**B.**

Full Name (Last, First, Middle Initial)

KELLEY, STEPHEN, M., ,

Mailing Address 15 AVON RD  
PO BOX 279City  
GENESE0State  
NYZip Code  
14454-1001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : A0DDF9E9E84FA45E59D4

Amount of Each Receipt this Period

500.00

☒ Memo Item

REDESIGNATION TO

**C.**

Full Name (Last, First, Middle Initial)

KENEFICK, JEFFREY, P., ,

Mailing Address 10887 CHURCH CREEK RD

City  
LINDLEYState  
NYZip Code  
14858-9677FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHEMUNG CANAL TRUST COOccupation  
BANKER

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  
06 24 2025

Transaction ID : A7216972C3D1C4CD7BF8

Amount of Each Receipt this Period

500.00

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

500.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KIMBELL, JEFFREY, , ,

**A.**

Mailing Address 950 AERIE DRIVE

City

PARK CITY

State

UT

Zip Code

84060-8846

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
HEALTH CARE CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A72EEB0DD21AC4B129BF

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KING, ROBERT, , ,

**B.**

Mailing Address 1238 BUCKS RUN

City

WEBSTER

State

NY

Zip Code

14580-9147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
LAWYER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A1BC5D5BC7A8F45EBB6E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KLUMP, ROBERT, A., ,

**C.**

Mailing Address 158 RANCH TRAIL

City

WILLIAMSVILLE

State

NY

Zip Code

14221-2439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUNY BUFFALOOccupation  
PROFESSOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

349.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

Transaction ID : A68E625BFC3DD4C72A9F

Amount of Each Receipt this Period

150.00

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

3150.00

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

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<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KOLEGO, TREVOR, , ,

**A.**

Mailing Address 217 VIRGINIA AVE

City

ALEXANDRIA

State

VA

Zip Code

22302-2906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE SMITH FREE GROUP

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A4C0E4403401D47D5A40

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LARUSSO, VINCENT, , ,

**B.**

Mailing Address 24 HARCOURT RD

City

PLAINVIEW

State

NY

Zip Code

11803-6106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BOCES

Occupation

PROGRAM MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AD9DBB353AE684D25A66

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A6541F489572E49B393F

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LAWSON, JAMES, KENNETH, ,

**A.**

Mailing Address 65 NORWALK AVE

City

BUFFALO

State

NY

Zip Code

14216-2819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

589.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2025D D / Y Y Y Y Y  
30 / 2025Y Y Y Y Y  
2025

Transaction ID : A7D84F1D7F914442BA6E

Amount of Each Receipt this Period

200.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

LIEBERMAN, RANDOLPH, , ,

Mailing Address 3420 MCKINLEY PKWY BUILDING J APT2

City

BLASDELL

State

NY

Zip Code

14219-2172

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : A3DD536A466D345D49EA

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A9D227A2258B64A2BA89

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

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

300.00

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



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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LIEBERMAN, RANDOLPH, , ,

**A.**

Mailing Address 3420 MCKINLEY PKWY BUILDING J APT2

City

BLASDELL

State

NY

Zip Code

14219-2172

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : A0135277BFC5F4B86947

Amount of Each Receipt this Period

10.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A08C1EFA2B1CF496CBA8

Amount of Each Receipt this Period

10.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

LIEBERMAN, RANDOLPH, , ,

**C.**

Mailing Address 3420 MCKINLEY PKWY BUILDING J APT2

City

BLASDELL

State

NY

Zip Code

14219-2172

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : A46A428039372480CB62

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

110.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED****A.** Mailing Address PO BOX 9891City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**80265.49**

Date of Receipt

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

Transaction ID : **AD69F00ECC8F749CBB1E**

Amount of Each Receipt this Period

**100.00**☒ Memo Item

INTERMEDIARY

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

Mailing Address 101 SLADE AVE

City  
**WEST SENECA**State  
**NY**Zip Code  
**14224-2619**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**LORIGO LAW FIRM****ATTORNEY**

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1250.00**

Date of Receipt

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

Transaction ID : **A80FBD3038B1A4D16962**

Amount of Each Receipt this Period

**1000.00**☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**MATTOON, DANIEL, JAMES, ,**

Mailing Address 6344 CAVALIER CORRIDOR

City  
**FALLS CHURCH**State  
**VA**Zip Code  
**22044-1203**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**MATTOON & ASSOCIATES****PRESIDENT**

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1350.00**

Date of Receipt

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

Transaction ID : **AED4918958D024ACC933**

Amount of Each Receipt this Period

**750.00**☐ Memo Item**1750.00****SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MAZZULLO, DONALD, S., ,

**A.** Mailing Address 160 EDGEMERE DR

City

ROCHESTER

State

NY

Zip Code

14612-1740

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : A59106D8EE9DC4EDEA04

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCCARTHY, KAREN, M., ,

**B.** Mailing Address 562 ROYCROFT BLVD

City

CHEEKTOWAGA

State

NY

Zip Code

14225-1052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 24 2025

Transaction ID : A43831464B9244F2287A

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCLAUGHLIN, PATRICK, J., ,

**C.** Mailing Address 108 STATE ST  
APT 301

City

SCHENECTADY

State

NY

Zip Code

12305-1742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MATRIX PBM

Occupation

PRESIDENT

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  
06 30 2025

Transaction ID : AB7202C7AA69642F3803

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)..... ▶

3100.00

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

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<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MEREU, RICHARD, , ,

**A.**

Mailing Address 4211 SHANNON HILL RD

City

ALEXANDRIA

State

VA

Zip Code

22310-2938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EMERGENCY NURSES ASSOC.

Occupation

CHIEF GOV. RELATIONS OFFICER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2025D D / Y Y Y Y Y  
03 / 2025Y Y Y Y Y  
2025

Transaction ID : A1F6C2490A8B24E30A17

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MERRY, JOAN, , ,

**B.**

Mailing Address 32 WEST AVE

City

ARKPORT

State

NY

Zip Code

14807-9777

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEUBEN CO DA

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : A036AA319C8C0442A99E

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MILITELLO, JOHN, S., ,

**C.**

Mailing Address 493 KENNEDY RD

City

BUFFALO

State

NY

Zip Code

14227-1031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KIMILCO

Occupation

PRESIDENT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : A646A74E4708041628BE

Amount of Each Receipt this Period

250.00

☐ Memo Item

750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 150

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MILLER, CHRISTOPHER, , ,

**A.**

Mailing Address 800 N CAPITOL ST NW

STE 800

City

WASHINGTON

State

DC

Zip Code

20002-4398

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CROSSROADS STRATEGIES

Occupation

CONSULTANT

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  
06 / 30 / 2025

Transaction ID : AD578365BAC2C4250A54

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MONDELLO, LISETTE, , ,

**B.**

Mailing Address 2707 S GROVE ST

City

ARLINGTON

State

VA

Zip Code

22202-2423

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE MONDELLO GROUP LLC

Occupation

PUBLIC AFFAIRS

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  
06 / 23 / 2025

Transaction ID : A8CC99D4E21894BDAB70

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORINELLO, ANGELO, J., ,

**C.**

Mailing Address 151 BUFFALO AVE

APT 808

City

NIAGARA FALLS

State

NY

Zip Code

14303-1235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK STATE

Occupation

ASSEMBLYMAN

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  
06 / 23 / 2025

Transaction ID : A751FCA953E6A479998E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 46 OF 150

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

**A.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 23 2025

Transaction ID : AC8D56A8E25E7476EB01

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)  
MOSS, NANETTE, M., ,

**B.** Mailing Address 612 COBURN ST.

City  
ELMIRA

State  
NY

Zip Code  
14904-1631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

CHEMUNG COUNTY

SECRETARY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 24 2025

Transaction ID : A3AFE2A911EC148BD9CC

Amount of Each Receipt this Period

274.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
PALERMO, SILVIO, , ,

**C.** Mailing Address 251 ROSELAND LN

City  
CANANDAIGUA

State  
NY

Zip Code  
14424-2356

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

GOVERNMENT

LAW ENFORCEMENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 13 2025

Transaction ID : A12322A614904452BB6E

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

524.00

X	11a		11b		11c		11d		
	12		13a		13b		14		15

LANGWORTHY FOR CONGRESS

FEC Schedule A (Form 3) (Revised 05/2016)

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PERRIGO, KAREN, M., ,

**A.**Mailing Address 20 WATER ST  
PO BOX 65City  
CUBAState  
NYZip Code  
14727-1023FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY/CPA

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 24 2025

Transaction ID : A2D04DAACD90D4AB9AF5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PHILLIPS LYTLE LLP

**B.**

Mailing Address 125 MAIN ST

City  
BUFFALOState  
NYZip Code  
14203-3042FEC ID number of contributing  
federal political committee.

C

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  
06 24 2025

Transaction ID : A5949A93F23314FEC85D

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SEE PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

SCHMIDT, JOHN, G., , JR.

**C.**

Mailing Address 887 PARKSIDE AVE

City  
BUFFALOState  
NYZip Code  
14216-2013FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PHILLIPS LYTLE LLPOccupation  
PARTNER

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  
06 24 2025

Transaction ID : A9CAAB4EB5563408F84A

Amount of Each Receipt this Period

3500.00

☒ Memo Item

PARTNERSHIP: PHILLIPS LYTLE LLP

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

3750.00

**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 49 OF 150

☒ 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PICKERING, ELISE, , ,

**A.**

Mailing Address 3721 TAFT AVE

City

ALEXANDRIA

State

VA

Zip Code

22304-2617

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MEHLMAN CONSULTING

Occupation

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 26 2025

Transaction ID : A7FB123FAEE754351998

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PLANAUSKY, RICHARD, J., ,

**B.**

Mailing Address 909 N COLONY RD

City

GRAND ISLAND

State

NY

Zip Code

14072-2801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ERIE COUNTY WATER AUTHORITY

Occupation

BUDGET DIRECTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : A1B08016A9DD245D3A99

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

POLINER, BRIAN, R., ,

**C.**

Mailing Address 10860 BODINE RD

City

CLARENCE

State

NY

Zip Code

14031-2249

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 25 2025

Transaction ID : AB42041AD9C5142D8B23

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

700.00

**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 50 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A4A57C72F762847919BA

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

RATHKE, JOHN, , ,

Mailing Address 3361 WOODLAND RDG

City

GREEN BAY

State

WI

Zip Code

54313-7232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MEAD &amp; HUNT, INC

ENGINEER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A34F08DAD34524ABEBEC

Amount of Each Receipt this Period

250.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
AMERICAN COUNCIL OF ENGINEERING**C.**

Full Name (Last, First, Middle Initial)

AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC PAC)

Mailing Address 1400 L ST NW  
STE 400

City

WASHINGTON

State

DC

Zip Code

20005-3592

FEC ID number of contributing  
federal political committee.

C

C00010868

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID : AE4F2C83C0FDE4473878

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

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

250.00

**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 51 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

REID, LOIS, J., ,

**A.**

Mailing Address 70 GROTON DR

APT 2

City

BUFFALO

State

NY

Zip Code

14228-2544

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A16A56C0F844F4138A27

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RICHARDSON, ROBERT, N., ,

**B.**

Mailing Address 255 LAURIE LN

City

GRAND ISLAND

State

NY

Zip Code

14072-1917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK STATE

Occupation

LAWYER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

299.00

Date of Receipt

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

Transaction ID : A0BE3A297AB764BFFA0E

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A09C08906B6DD47479ED

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

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

300.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RICH, RYAN, P., ,

**A.**

Mailing Address 4476 MAIN ST

UNIT 104

City

BUFFALO

State

NY

Zip Code

14226-4463

FEC ID number of contributing  
federal political committee.

C

Name of Employer

24-VENTURES

Occupation

BUSINESS DEVELOPER

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  
06 / 30 / 2025

Transaction ID : A16F60E51696F43718F2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROSENBAUM, JERR, , ,

**B.**

Mailing Address 2549 NORTH RIDGEVIEW ROAD

City

ARLINGTON

State

VA

Zip Code

22207-5113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENN AVENUE PARTNERS

Occupation

CONSULTANT

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  
06 / 17 / 2025

Transaction ID : A22C304F8D1CD4FA7BE3

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROTH, ROBERT, N., ,

**C.**

Mailing Address 182 N MAIN ST

City

HOLLAND

State

NY

Zip Code

14080-9718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROTH'S HILLSIDE TREES

Occupation

FARMER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 24 / 2025

Transaction ID : A55F0B634191F4F1C91A

Amount of Each Receipt this Period

250.00

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

2750.00

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

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

PAGE 53 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RULISON, JOSEPH, R., ,

**A.**

Mailing Address 150 PELHAM RD

City

ROCHESTER

State

NY

Zip Code

14610-2520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THREE+ONEOccupation  
CO-FOUNDER & CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID : A536C519202A54FEFA2A

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RULISON, KAREN, R., ,

**B.**

Mailing Address 150 PELHAM RD

City

ROCHESTER

State

NY

Zip Code

14610-2520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID : AEFEC6528EBA41E2AA9

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RUSK, BRIAN, D., ,

**C.**

Mailing Address 340 WELLINGWOOD DR

City

EAST AMHERST

State

NY

Zip Code

14051-1753

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
PUBLIC RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

699.00

Date of Receipt

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

Transaction ID : A8D33B231D6014369B80

Amount of Each Receipt this Period

250.00

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

2750.00

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

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

PAGE 54 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RUSK, BRIAN, D., ,

**A.** Mailing Address 340 WELLINGWOOD DRCity  
EAST AMHERSTState  
NYZip Code  
14051-1753FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
PUBLIC RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

699.00

Date of Receipt

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

Transaction ID : A6270B9A4EC634F95B70

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RUSK, BRIAN, D., ,

**B.** Mailing Address 340 WELLINGWOOD DRCity  
EAST AMHERSTState  
NYZip Code  
14051-1753FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
PUBLIC RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

799.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 24 2025

Transaction ID : AF0A7E58CB7FA4017BAE

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SANDERSON, JOCELYN, , ,

**C.** Mailing Address 6301 WALNUT CREEK DRCity  
EAST AMHERSTState  
NYZip Code  
14051-1552FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KITCHEN STOREOccupation  
OFFICE MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : A1A8B3AF401C0416E8E0

Amount of Each Receipt this Period

300.00

☐ Memo Item

650.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SASS, PAUL, , ,

**A.**

Mailing Address 201 WEST WALNUT STREET

City

ALEXANDRIA

State

VA

Zip Code

22301-2533

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CASSIDY AND ASSOCIATES

Occupation

CONSULTANT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	5

Transaction ID : AFFC9DA85F19547249B2

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

SCARDUFFA, MARC, , ,

**B.**Mailing Address 536 WEST 111 STREET  
#76

City

NEW YORK

State

NY

Zip Code

10025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYU LANGONE HEALTH

Occupation

LOBBYIST

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A6BA52FFF6CD6455DB24

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

SEMPOLINSKI, JOSEPH, M., ,

**C.**

Mailing Address 22 3RD ST

City

CANISTEO

State

NY

Zip Code

14823-1134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYS ASSEMBLY

Occupation

ASSEMBLYMAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

Transaction ID : A3104B0C0E59E4990863

Amount of Each Receipt this Period

500.00



Memo Item

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

1500.00

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

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

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

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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SHEHATA, EHAB, , ,

**A.**

Mailing Address 42 W 39TH ST

City  
NEW YORKState  
NYZip Code  
10018-3809FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BRAVO GROUPOccupation  
PRESIDENT & CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 28 2025

Transaction ID : A51BC5591C58642598A8

Amount of Each Receipt this Period

250.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
AMERICAN COUNCIL OF ENGINEERING**B.**

Full Name (Last, First, Middle Initial)

AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC PAC)

Mailing Address 1400 L ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20005-3592FEC ID number of contributing  
federal political committee.

C C00010868

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 28 2025

Transaction ID : A34F39FB466BA465196F

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

SIMMETH, KARL, J., ,

Mailing Address 6678 MEADOWBROOK DRIVE

City  
BOSTONState  
NYZip Code  
14025-9622FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

299.00

Date of Receipt

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

Transaction ID : ACC0B7B43BE4249D7A18

Amount of Each Receipt this Period

100.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

350.00

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



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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A045164FF83CD469FBFC

Amount of Each Receipt this Period

100.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

STAMBACH, MARK, R., ,

Mailing Address 23 BROMPTON CIR

City

WILLIAMSVILLE

State

NY

Zip Code

14221-5917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

Transaction ID : A3C1E254EAF874A16949

Amount of Each Receipt this Period

200.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

STONE, JOHN, , ,

Mailing Address 1401 COVENTRY LN

City

ALEXANDRIA

State

VA

Zip Code

22304-1824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

BGR GROUP

CONSULTANT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

Transaction ID : A4D540FC0163D4339A8A

Amount of Each Receipt this Period

500.00

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

700.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STRANGE, RODNEY, , ,

**A.** Mailing Address 386 RAECREST CIRCity  
ELMIRAState  
NYZip Code  
14904-2816FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELBOW ROOMOccupation  
KITCHEN MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 16 2025

Transaction ID : A90EF1B36719245F7827

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SURACE, ROCCO, , ,

**B.** Mailing Address 6384 OCONNOR DRCity  
LOCKPORTState  
NYZip Code  
14094-6529FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 10 2025

Transaction ID : AD0A421FFEE354C11B5D

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

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

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 10 2025

Transaction ID : A2BD19D8F217A441CB11

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

750.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SUTTER, BRIAN, , ,

**A.**

Mailing Address 212 N QUAKER LN

City

ALEXANDRIA

State

VA

Zip Code

22304-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPITOL HILL CONSULTING GROUP

Occupation

SENIOR VP

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  
06 30 2025

Transaction ID : AA16A5E0E6E8C445B87A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TAMASI, DAVID, , ,

**B.**

Mailing Address 1 WINSTON FARM LN

City

FAR HILLS

State

NJ

Zip Code

07931-2202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHARTWELL STRATEGY GROUP

Occupation

GOVERNMENT RELATIONS

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  
06 18 2025

Transaction ID : A2A05FF28A3F040D990B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TAMASI, DAVID, , ,

**C.**

Mailing Address 1 WINSTON FARM LN

City

FAR HILLS

State

NJ

Zip Code

07931-2202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHARTWELL STRATEGY GROUP

Occupation

GOVERNMENT RELATIONS

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  
06 30 2025

Transaction ID : AC902EAEF3D8E4F2C8CE

Amount of Each Receipt this Period

500.00

☐ Memo Item

2500.00

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

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

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<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TORREY, MAUREEN, , ,

**A.** Mailing Address PO BOX 366City  
ELBAState  
NYZip Code  
14058-0366FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

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

Transaction ID : A8E8ED90915CE42CC87E

Amount of Each Receipt this Period

- 1000.00

☒ Memo Item

REDESIGNATION FROM

**B.** Full Name (Last, First, Middle Initial)  
TORREY, MAUREEN, , ,

Mailing Address PO BOX 366

City  
ELBAState  
NYZip Code  
14058-0366FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

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

Transaction ID : A596C52CB8E6D433E895

Amount of Each Receipt this Period

1000.00

☒ Memo Item

REDESIGNATION TO

**C.** Full Name (Last, First, Middle Initial)  
TORREY, MAUREEN, , ,

Mailing Address PO BOX 366

City  
ELBAState  
NYZip Code  
14058-0366FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

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

Transaction ID : A5969C53069434A00BB1

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SEE REDESIGNATION

**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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City  
**ARLINGTON**

State  
**VA**

Zip Code  
**22219-1891**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**80265.49**

Date of Receipt

**06 / 11 / 2025**

Transaction ID : **A2CA5EEEE15714B56B6D**

Amount of Each Receipt this Period

**3500.00**

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)  
**TUCKER, JAMES, ROMNEY, , JR.**

Mailing Address 2237 46TH ST NW

City  
**WASHINGTON**

State  
**DC**

Zip Code  
**20007-1032**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**AKIN GUMP STRAUSS HAUSER & FELD LLP**

**PARTNER**

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

Date of Receipt

**05 / 12 / 2025**

Transaction ID : **ACCB8D364ED2141BCA3F**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

Full Name (Last, First, Middle Initial)  
**VACCO, DENNIS, C., ,**

Mailing Address 6420 HILLCROFT DR

City  
**BOSTON**

State  
**NY**

Zip Code  
**14025-9709**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**LIPPES MATHIAS LLP**

**ATTORNEY**

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**7000.00**

Date of Receipt

**06 / 30 / 2025**

Transaction ID : **A3762E70E5FA545B0B24**

Amount of Each Receipt this Period

**3500.00**

☐ Memo Item

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

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

**4000.00**

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

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<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

VAKERICS, MITCHELL, , ,

**A.** Mailing Address 1634 N ABINGDON STCity  
ARLINGTONState  
VAZip Code  
22207-2142FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VERITAS HEALTH POLICYOccupation  
PRESIDENT & CEO

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  
06 27 2025

Transaction ID : A593C9A1FF90E40CE958

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VAN PELT, JASON, , ,

**B.** Mailing Address 800 N CAPITOL ST NW  
STE 800City  
WASHINGTONState  
DCZip Code  
20002-4398FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CROSSROADS STRATEGIESOccupation  
LOBBYIST

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  
06 30 2025

Transaction ID : A70530066464340A19BB

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALTER, JEFFERY, M., ,

**C.** Mailing Address 318 DUKE STREETCity  
ALEXANDRIAState  
VAZip Code  
22314-3734FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPITOL COUNSELOccupation  
CONSULTANT

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  
06 16 2025

Transaction ID : A9B2703CE5A3F48AD832

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)..... ▶

3000.00

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

PAGE 63 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WELLS, PHILIP, , ,

**A.**

Mailing Address 98 LINCOLN RD

City

BUFFALO

State

NY

Zip Code

14226-4457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

E3COMMUNICATIONS

Occupation

DIRECTOR OF PUBLIC RELATIONS

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 20 / 2025D D / Y Y Y Y Y  
20 / 2025Y Y Y Y Y  
2025

Transaction ID : A5FD7E3F087F94837B47

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 20 / 2025D D / Y Y Y Y Y  
20 / 2025Y Y Y Y Y  
2025

Transaction ID : A5C52E206146A4580BAF

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

WHITE, JOEL, , ,

**C.**

Mailing Address 1707 VALLEY AVE

City

MCLEAN

State

VA

Zip Code

22101-4721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HORIZON GOVERNMENT AFFAIRS

Occupation

CONSULTANT

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  
06 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : ADC04E272104C4BA1B7E

Amount of Each Receipt this Period

500.00

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WILLCOX, DARREN, , ,

**A.** Mailing Address 9696 MILL RIDGE LNCity  
GREAT FALLSState  
VAZip Code  
22066-2300FEC ID number of contributing  
federal political committee.

C

Name of Employer  
W STRATEGIESOccupation  
CONSULTANT

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	
06		10		2025	

Transaction ID : A8265ADC46EF14ECF96E

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
SEE REDESIGNATION

Full Name (Last, First, Middle Initial)

WILLCOX, DARREN, , ,

**B.** Mailing Address 9696 MILL RIDGE LNCity  
GREAT FALLSState  
VAZip Code  
22066-2300FEC ID number of contributing  
federal political committee.

C

Name of Employer  
W STRATEGIESOccupation  
CONSULTANT

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	
06		10		2025	

Transaction ID : AB623D403A9174B1C9F2

Amount of Each Receipt this Period

- 1000.00

☒ Memo Item  
REDESIGNATION FROM

Full Name (Last, First, Middle Initial)

WILLCOX, DARREN, , ,

**C.** Mailing Address 9696 MILL RIDGE LNCity  
GREAT FALLSState  
VAZip Code  
22066-2300FEC ID number of contributing  
federal political committee.

C

Name of Employer  
W STRATEGIESOccupation  
CONSULTANT

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	
06		10		2025	

Transaction ID : A5FDEC6E220E643329F6

Amount of Each Receipt this Period

1000.00

☒ Memo Item  
REDESIGNATION TO**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)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINNER, GEORGE, H., , JR.

**A.**

Mailing Address 150 LAKE ST

City

ELMIRA

State

NY

Zip Code

14901-3401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KMW LAW

Occupation

ATTORNEY

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  
06 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : A7531C6EF72F04A61831

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

WOJTASZEK, HENRY, F., ,

Mailing Address 620 E GOUNDRY ST

City

NORTH TONAWANDA

State

NY

Zip Code

14120-5619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIPPES MATTHIAS

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4199.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 23 / 2025D D / Y Y Y Y Y  
23 / 2025Y Y Y Y Y  
2025

Transaction ID : AB1658D63612043DA856

Amount of Each Receipt this Period

- 100.00

☒ Memo Item

REDESIGNATION FROM

**C.**

Full Name (Last, First, Middle Initial)

WOJTASZEK, HENRY, F., ,

Mailing Address 620 E GOUNDRY ST

City

NORTH TONAWANDA

State

NY

Zip Code

14120-5619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIPPES MATTHIAS

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4199.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 23 / 2025D D / Y Y Y Y Y  
23 / 2025Y Y Y Y Y  
2025

Transaction ID : A7568FB02F07246A4965

Amount of Each Receipt this Period

100.00

☒ Memo Item

REDESIGNATION TO

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

500.00

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

PAGE 66 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WOJTASZEK, HENRY, F., ,

**A.** Mailing Address 620 E GOUNDRY STCity  
NORTH TONAWANDAState  
NYZip Code  
14120-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIPPES MATTHIASOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4199.00

Date of Receipt

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

Transaction ID : AB57447BB17D54946ABE

Amount of Each Receipt this Period

100.00

☐ Memo Item  
SEE REDESIGNATION

Full Name (Last, First, Middle Initial)

WINRED

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

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

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

Transaction ID : A979BF9C13C804D86937

Amount of Each Receipt this Period

100.00

☒ Memo Item  
INTERMEDIARYTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

WOODARD, STEVEN, J., ,

**C.** Mailing Address 910 VIRGINIA DRCity  
ALDENState  
NYZip Code  
14004-9564FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALDEN STATE BANKOccupation  
BANKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

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

Transaction ID : AF363FB3934A24D11A21

Amount of Each Receipt this Period

950.00

☐ Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED**SUBTOTAL** of Receipts This Page (optional)..... ▶

1050.00

**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 67 OF 150

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**WINRED**

**A.** Mailing Address PO BOX 9891

City  
**ARLINGTON**

State  
**VA**

Zip Code  
**22219-1891**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**80265.49**

Date of Receipt

**06 / 02 / 2025**

**Transaction ID : A47E0EE7CE3F44A9A90D**

Amount of Each Receipt this Period

**950.00**

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)  
**ZEPLOWITZ, BARRY, , ,**

**B.** Mailing Address 144 THE VILLAGE GRN

City  
**WILLIAMSVILLE**

State  
**NY**

Zip Code  
**14221-4532**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

**BARRY ZEPLOWITZ & ASSOCIATES**

**PARTNER**

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**450.00**

Date of Receipt

**06 / 24 / 2025**

**Transaction ID : A65462FDB54964BCDA62**

Amount of Each Receipt this Period

**100.00**

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

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

**100.00**

**107284.00**

**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 68 OF 150

<input type="checkbox"/> 11a	<input checked="" 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALLEGANY COUNTY REPUBLICAN COMMITTEE****A.**

Mailing Address 86 W MAIN ST

ATTN: LEE JAMES

City  
CUBAState  
NYZip Code  
14727-1435FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 18 2025

Transaction ID : ACAA3A91044944E05B1F

Amount of Each Receipt this Period

950.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

**B.**

Full Name (Last, First, Middle Initial)

**WINRED**

Mailing Address PO BOX 9891

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

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

80265.49

Date of Receipt

M M / D D / Y Y Y Y Y  
06 18 2025

Transaction ID : A9A404FE0A16D4293949

Amount of Each Receipt this Period

950.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

**CLARENCE REPUBLICAN COMMITTEE**

Mailing Address PO BOX 207

City  
CLARENCE CENTERState  
NYZip Code  
14032-0207FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : A4E2FDB5628F84524910

Amount of Each Receipt this Period

500.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

1450.00

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

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

PAGE 69 OF 150

<input type="checkbox"/> 11a	<input checked="" 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ELECT AMHERST REPUBLICANS****A.**

Mailing Address PO BOX 289

City

EAST AMHERST

State

NY

Zip Code

14051-0289

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : A0E10D4096E7D405D944

Amount of Each Receipt this Period

950.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

**NIAGARA COUNTY REPUBLICAN COMMITTEE****B.**

Mailing Address PO BOX 196

City

LOCKPORT

State

NY

Zip Code

14095-0196

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1049.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : A21963B1E79394D0694D

Amount of Each Receipt this Period

950.00

☐ Memo ItemFEDERALLY PERMISSIBLE FUNDS; REFUNDED \$49  
ON 7/3/2025

Full Name (Last, First, Middle Initial)

**ORLEANS COUNTY REPUBLICAN COMMITTEE****C.**

Mailing Address 210 ANN ST

City

MEDINA

State

NY

Zip Code

14103-1131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : AA8540E169EE04B40B32

Amount of Each Receipt this Period

300.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

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

2200.00

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

3650.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
340B HEALTH PAC

Mailing Address 1101 15TH ST NW

City  
WASHINGTONState  
DCZip Code  
20005-5003FEC ID number of contributing  
federal political committee.

C C00619601

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  
06 30 2025

Transaction ID : ADA63FEC6060E4C8F912

Amount of Each Receipt this Period

1500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
AFLAC PAC (AFLAC PAC)

Mailing Address 1932 WYNNNTON RD

City  
COLUMBUSState  
GAZip Code  
31999-0001FEC 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 Y  
06 19 2025

Transaction ID : A1CEF4C9EAF2B4AFD960

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
ALLARD FOR SHERIFF

Mailing Address PO BOX 911

City  
CORNINGState  
NYZip Code  
14830-4911FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

99.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 24 2025

Transaction ID : A9A2859F825EC4F14B1B

Amount of Each Receipt this Period

99.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

4099.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN AIRLINES INC. PAC (AAPAC)****A.**Mailing Address 1200 17TH ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20036-3012FEC ID number of contributing  
federal political committee.**C** C00107300

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A57DDE0BF8F534B1394B

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**AMERICAN AIRLINES INC. PAC (AAPAC)**Mailing Address 1200 17TH ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20036-3012FEC ID number of contributing  
federal political committee.**C** C00107300

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
0	6		2	3		2	0	2	5

Transaction ID : AFD18E2E004764A40933

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**AMERICAN BUS ASSOCIATION PAC - BUSPAC**Mailing Address 111 K ST NE  
FL 9City  
WASHINGTONState  
DCZip Code  
20002-8110FEC ID number of contributing  
federal political committee.**C** C00004879

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A348A222AC47444F9979

Amount of Each Receipt this Period

1500.00

☐ Memo Item

5000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC PAC)****A.**

Mailing Address 1400 L ST NW

STE 400

City

WASHINGTON

State

DC

Zip Code

20005-3592

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

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6100.00

Date of Receipt

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

**Transaction ID : AF15968427E014CF89CA**

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN DENTAL ASSOCIATION PAC (ADA PAC)****B.**

Mailing Address 1111 14TH ST NW

STE 1100

City

WASHINGTON

State

DC

Zip Code

20005-5627

FEC ID number of contributing  
federal political committee.**C** C00000729

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

**Transaction ID : A865CE67E6D774823A16**

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN FUELS AND PETROCHEMICAL MANUFACTURERS ASSOCIATION PAC (AFPMPAC)****C.**

Mailing Address 1800 M ST NW

STE 900

City

WASHINGTON

State

DC

Zip Code

20036-5802

FEC ID number of contributing  
federal political committee.**C** C00415026

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

**Transaction ID : A621928DC2A284E478FD**

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)..... ▶

6000.00



FOR LINE NUMBER:  
(check only one)

Diagram of a 1D lattice with 5 sites. Site 11c is crossed out. Labels: 11a, 11b, 11c, 11d, 12, 13a, 13b, 14, 15.

LANGWORTHY FOR CONGRESS

The diagram shows a rectangular frame with 10 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

**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 74 OF 150

<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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA ROC-PAC)

**A.**Mailing Address 1201 15TH ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20005-2899FEC ID number of contributing  
federal political committee.**C** C00358663

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		19		2025

Transaction ID : A4D783899B6F34C2D8C5

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN VETERINARY MEDICAL ASSOCIATION PAC (AVMA PAC)

**B.**

Mailing Address 1910 SUNDERLAND PL NW

City  
WASHINGTONState  
DCZip Code  
20036-1608FEC ID number of contributing  
federal political committee.**C** C00114132

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
06		19		2025

Transaction ID : A7E7D52A54C06442AB55

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICA'S ELECTRIC COOPERATIVES PAC

**C.**

Mailing Address 4301 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22203-4419FEC ID number of contributing  
federal political committee.**C** C00002972

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
05		12		2025

Transaction ID : A5B08E916ECBF4A92947

Amount of Each Receipt this Period

2000.00

☐ Memo Item

8000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMGEN INC. PAC

Mailing Address 601 13TH ST NW  
STE 1100City  
WASHINGTONState  
DCZip Code  
20005-3822

Date of Receipt

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

Transaction ID : AF2AEAD4E4BC049F0A56

FEC ID number of contributing  
federal political committee.

C C00251876

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ASSOCIATION OF PROFESSIONAL FLIGHT ATTENDANTS (APFA PAC) PAC

Mailing Address 1004 W EULESS BLVD

City  
EULESSState  
TXZip Code  
76040-5009

Date of Receipt

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

Transaction ID : AAFB472E6303543A7943

FEC ID number of contributing  
federal political committee.

C C00246421

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AT&amp;T INC. EMPLOYEE FEDERAL PAC

Mailing Address 208 S AKARD ST  
STE 1812City  
DALLASState  
TXZip Code  
75202-4206

Date of Receipt

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

Transaction ID : A5DCC5CF0DEDA48A2A1A

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 ▼

2000.00

Amount of Each Receipt this Period

2000.00

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

5500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AUTO CARE ASSOCIATION PAC**Mailing Address 7101 WISCONSIN AVE  
STE 1300City  
BETHESDAState  
MDZip Code  
20814-4866FEC ID number of contributing  
federal political committee.**C** C00250753

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.01

Date of Receipt

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

Transaction ID : ABF84FEB548C04B3E802

Amount of Each Receipt this Period

0.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AUTO CARE ASSOCIATION PAC**Mailing Address 7101 WISCONSIN AVE  
STE 1300City  
BETHESDAState  
MDZip Code  
20814-4866FEC ID number of contributing  
federal political committee.**C** C00250753

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.01

Date of Receipt

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

Transaction ID : ACDD0086F20CD4E13AAE

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BRINGING REPUBLICAN EXCELLENCE TO TOWN (BRETT PAC)**

Mailing Address PO BOX 22401

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A0E393919426A43F0824

Amount of Each Receipt this Period

2500.00

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

4500.01

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BRINGING REPUBLICAN EXCELLENCE TO TOWN (BRETT PAC)****A.** Mailing Address PO BOX 22401City  
LOUISVILLEState  
KYZip Code  
40252-0401FEC ID number of contributing  
federal political committee.**C** C00483487

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : A03E727B541434EB0B74

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** CENTENE CORPORATION PAC (CENTENE PAC)

Mailing Address CENTENE PLAZA 7700 FORSYTH BLVD

City  
SAINT LOUISState  
MOZip Code  
63105FEC ID number of contributing  
federal political committee.**C** C00397851

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  
06 30 2025

Transaction ID : A79CA55ECC3B9430887C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** CHARTER COMMUNICATIONS INC. PACMailing Address 400 ATLANTIC ST  
FL 10City  
STAMFORDState  
CTZip Code  
06901-3512FEC ID number of contributing  
federal political committee.**C** C00426775

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 19 2025

Transaction ID : AECAB0B5B37EC4F1B83D

Amount of Each Receipt this Period

5000.00

☐ Memo Item

8500.00

**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)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHEVRON EMPLOYEES PAC (CEPAC)**

Mailing Address 5001 EXECUTIVE PKWY  
RM 3W001

City  
SAN RAMON

State  
CA

Zip Code  
94583-5006

FEC ID number of contributing  
federal political committee.

**C** C00035006

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  
06 30 2025

Transaction ID : A81874E667BC64AB0891

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CONSTELLATION BRANDS INC PAC**

Mailing Address 207 HIGH POINT DR  
BLDG 100

City  
VICTOR

State  
NY

Zip Code  
14564-1061

FEC ID number of contributing  
federal political committee.

**C** C00304832

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 18 2025

Transaction ID : A7E5B7CBB5DDE49DF805

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CONSUMER HEALTHCARE PRODUCTS ASSOCIATION PAC (CHPA/PAC)**

Mailing Address 1625 I ST NW  
STE 600

City  
WASHINGTON

State  
DC

Zip Code  
20006-4017

FEC ID number of contributing  
federal political committee.

**C** C00040584

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  
05 12 2025

Transaction ID : A48664EF7F5724420B59

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

8500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COX ENTERPRISES PAC (COXPAC) INC.****A.**Mailing Address 975 F ST NW  
STE 300City  
WASHINGTONState  
DCZip Code  
20004-1459FEC ID number of contributing  
federal political committee.**C** C00477653

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
04		11		2025

Transaction ID : ACD57FDF325E548F1B25

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CUMMINS INC. PAC (CIPAC)****B.**Mailing Address 601 PENNSYLVANIA AVE NW  
NORTH BUILDING SUITE 1100NCity  
WASHINGTONState  
DCZip Code  
20004-2601FEC ID number of contributing  
federal political committee.**C** C00377952

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
06		23		2025

Transaction ID : A8FE85E92162A4F5C915

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**DEFENDING THE AMERICAN DREAM PAC****C.**Mailing Address 2211 E HIGHLAND AVE  
STE 210City  
PHOENIXState  
AZZip Code  
85016-4834FEC ID number of contributing  
federal political committee.**C** C00822833

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
06		26		2025

Transaction ID : A9624BA6C645F4E88B43

Amount of Each Receipt this Period

5000.00

☐ Memo Item

9000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DELTA AIR LINES PAC

A.

Mailing Address 601 PENNSYLVANIA AVE NW  
STE 700City  
WASHINGTONState  
DCZip Code  
20004-2601FEC ID number of contributing  
federal political committee.

C C00104802

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  
05 18 2025

Transaction ID : AEBD7B8FCCEA44CFF806

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DIPIETRO FOR YOU

B.

Mailing Address PO BOX 700

City  
EAST AURORAState  
NYZip Code  
14052-0700FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 24 2025

Transaction ID : A2CE910AB67AD4A73B0C

Amount of Each Receipt this Period

100.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)

C.

Mailing Address 1001 PENNSYLVANIA AVE NW  
STE 710City  
WASHINGTONState  
DCZip Code  
20004-2513FEC ID number of contributing  
federal political committee.

C C00197228

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : A172A4E5BF04248F59EA

Amount of Each Receipt this Period

3000.00

☐ Memo Item

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

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

4100.00



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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)**Mailing Address 1001 PENNSYLVANIA AVE NW  
STE 710City  
WASHINGTONState  
DCZip Code  
20004-2513FEC ID number of contributing  
federal political committee.**C** C00197228

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
06		30		2025

Transaction ID : AB7B7ED99E7BD4C07A3A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ENERGY MARKETERS OF AMERICA SMALL BUSINESS COMMITTEE PAC (EMA SBC PAC)**Mailing Address 1901 FORT MYER DR  
STE 500City  
ARLINGTONState  
VAZip Code  
22209-1609FEC ID number of contributing  
federal political committee.**C** C00035204

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
06		19		2025

Transaction ID : A3D02D9A1B4984B47BC8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**FEDEX CORPORATION PAC**Mailing Address 942 SHADY GROVE RD S  
FL 1City  
MEMPHISState  
TNZip Code  
38120-4117FEC ID number of contributing  
federal political committee.**C** C00068692

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
05		12		2025

Transaction ID : AFD1D98ECD366463780B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

3000.00

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

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

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<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FERT PAC (THE PAC OF THE FERTILIZER INSTITUTE)****A.**Mailing Address 425 3RD ST SW  
STE 960City  
WASHINGTONState  
DCZip Code  
20024-3206FEC ID number of contributing  
federal political committee.**C** C00085910

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AA98E32D8C10B45C6AF0

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**FOX CORPORATION PAC (FOX PAC)**Mailing Address 101 CONSTITUTION AVE NW  
STE 200City  
WASHINGTONState  
DCZip Code  
20001-2133FEC ID number of contributing  
federal political committee.**C** C00693002

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
0	6		3	0		2	0	2	5

Transaction ID : ACF300A28CC164F94BE7

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**FRIENDS FOR PALMESANO**

Mailing Address PO BOX 861

City  
CORNINGState  
NYZip Code  
14830-4861FEC ID number of contributing  
federal political committee.**C**

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
0	6		2	4		2	0	2	5

Transaction ID : A3F7FF8CF7CD74D0A924

Amount of Each Receipt this Period

500.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

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

4000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**FRIENDS OF CHARLES SNYDER**

Mailing Address 459 SNYDER RD

City  
EAST AURORAState  
NYZip Code  
14052FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

199.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 24 2025

Transaction ID : AE7FC907437EA4F50917

Amount of Each Receipt this Period

100.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)  
**FRIENDS OF JOHN BUCKLEY**

Mailing Address 9 W VANSCOTER ST

City  
HORNELLState  
NYZip Code  
14843-2119FEC ID number of contributing  
federal political committee.

C

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  
06 24 2025

Transaction ID : ABE907E96A58D404E854

Amount of Each Receipt this Period

500.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)  
**FRIENDS OF MICHAEL KRACKER**Mailing Address 715 MAIN ST  
STE 102City  
BUFFALOState  
NYZip Code  
14203-1333FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : A721AFFD361304DB4B50

Amount of Each Receipt this Period

950.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

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

1550.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FRIENDS OF TOM O'MARA****A.**

Mailing Address PO BOX 428

City

ELMIRA

State

NY

Zip Code

14902-0428

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

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
0	6		2	4		2	0	5	

Transaction ID : A11088157A2F2442F8F0

Amount of Each Receipt this Period

500.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

**B.**

Full Name (Last, First, Middle Initial)

**GENENTECH INC. PAC (GENENPAC)**Mailing Address 600 MASSACHUSETTS AVE NW  
STE 300

City

WASHINGTON

State

DC

Zip Code

20001-3544

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

C00199257

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
0	5		1	2		2	0	5	

Transaction ID : A0F54CF3CB3FAE4E3DA29

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**GENENTECH INC. PAC (GENENPAC)**Mailing Address 600 MASSACHUSETTS AVE NW  
STE 300

City

WASHINGTON

State

DC

Zip Code

20001-3544

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

C00199257

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	5	

Transaction ID : A3B0AD8F5E9F24F1D9AD

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GIGLIO FOR ASSEMBLY**

**A.**

Mailing Address 10132 BROADWAY RD

City

GOWANDA

State

NY

Zip Code

14070-9676

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : ACF7D4B56B8924477822

Amount of Each Receipt this Period

200.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

**B.**

Full Name (Last, First, Middle Initial)

**HEINEKEN USA INC GOOD GOVERNMENT FUND**

Mailing Address 360 HAMILTON AVE  
STE 1103

City

WHITE PLAINS

State

NY

Zip Code

10601-1841

FEC ID number of contributing  
federal political committee.

C

C00358234

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : ADDE3ADEE255640D39DD

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**C.**

Full Name (Last, First, Middle Initial)

**IN THE ARENA PAC**

Mailing Address PO BOX 7244

City

LITTLE ROCK

State

AR

Zip Code

72217-7244

FEC ID number of contributing  
federal political committee.

C

C00623512

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 19 2025

Transaction ID : A20B038A7EF334C99B9D

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

3700.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**INDEPENDENT COMMUNITY BANKERS OF AMERICA PAC****A.**Mailing Address 1615 L ST NW  
STE 900City  
WASHINGTONState  
DCZip Code  
20036-5623FEC ID number of contributing  
federal political committee.**C** C00032698

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
06		30		2025

Transaction ID : A7CB0D91572E54ED7A42

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC (INSURPAC)****B.**Mailing Address 20 F ST NW  
STE 610City  
WASHINGTONState  
DCZip Code  
20001-6707FEC ID number of contributing  
federal political committee.**C** C00022343

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
06		30		2025

Transaction ID : A10D4BB03D77140939B4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**JETBLUE AIRWAYS CORPORATION CREWMEMBER GOOD GOVERNMENT FUND****C.**

Mailing Address 2701 QUEENS PLZ N

City  
LONG ISLAND CITYState  
NYZip Code  
11101-4007FEC ID number of contributing  
federal political committee.**C** C00484584

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
06		30		2025

Transaction ID : A264C253C4DC04ECFAC6

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHNSON & JOHNSON PAC****A.**

Mailing Address 1350 I ST NW

STE 1210

City

WASHINGTON

State

DC

Zip Code

20005-3305

FEC ID number of contributing  
federal political committee.**C** C00010983

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
0	6		2	4		2	0	5	

Transaction ID : AE9623A5471724F05B8B

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

**KOCH INDUSTRIES, INC. PAC (KOCHPAC)****B.**

Mailing Address 4111 E 37TH ST N

City

WICHITA

State

KS

Zip Code

67220-3203

FEC ID number of contributing  
federal political committee.**C** C00236489

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	5	

Transaction ID : A3B16943C29A34583929

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

**LEADERSHIP AND LOYALTY ONLY TO AMERICA (LALOTA PAC)****C.**

Mailing Address PO BOX 5744

City

HAUPPAUGE

State

NY

Zip Code

11788-0155

FEC ID number of contributing  
federal political committee.**C** C00813063

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
0	6		3	0		2	0	5	

Transaction ID : A2D2F0ED0C5734DBCBB4

Amount of Each Receipt this Period

1000.00



Memo Item

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LIBERTY MUTUAL INSURANCE COMPANY - PAC****A.**

Mailing Address 175 BERKELEY ST

City  
BOSTONState  
MAZip Code  
02116-5066FEC ID number of contributing  
federal political committee.**C** C00171843

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  
06 30 2025

Transaction ID : A753D117B074D4BFB9C9

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Mailing Address 539 S MAIN ST

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : A508B93ADBA7242C086B

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A - FEDERAL ONLY****C.**

Mailing Address 200 PARK AVE

City  
NEW YORKState  
NYZip Code  
10166-0001FEC ID number of contributing  
federal political committee.**C** C00493551

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  
06 30 2025

Transaction ID : A4BD55A9A315A4E85A1C

Amount of Each Receipt this Period

1500.00

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

9000.00

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



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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MOLINA HEALTHCARE, INC. PAC****A.**

Mailing Address 200 OCEANGATE

STE 100

City

LONG BEACH

State

CA

Zip Code

90802-4317

FEC ID number of contributing  
federal political committee.**C** C00430256

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
06		19		2025

Transaction ID : AFBB14A410974421AB2D

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC****B.**

Mailing Address 1325 MASSACHUSETTS AVE NW

City

WASHINGTON

State

DC

Zip Code

20005-4171

FEC ID number of contributing  
federal political committee.**C** C00238725

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		19		2025

Transaction ID : A6D595780474E4B3C93A

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF CONVENIENCE STORES (NACS PAC)****C.**

Mailing Address 1600 DUKE ST

City

ALEXANDRIA

State

VA

Zip Code

22314-3466

FEC ID number of contributing  
federal political committee.**C** C00126763

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : AA0C535680C1F422FAC4

Amount of Each Receipt this Period

1000.00

☐ 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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF LETTER CARRIERS OF U.S.A. (LETTER CARRIER POLITICAL FUND)

**A.**

Mailing Address 100 INDIANA AVE NW

City

WASHINGTON

State

DC

Zip Code

20001-2143

FEC ID number of contributing  
federal political committee.

**C** C00023580

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  
06 30 2025

Transaction ID : AC92D8BEBEC4A54C98BA1

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF POSTAL SUPERVISORS PAC

**B.**

Mailing Address 1727 KING ST  
STE 400

City

ALEXANDRIA

State

VA

Zip Code

22314-2700

FEC ID number of contributing  
federal political committee.

**C** C00092957

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  
06 30 2025

Transaction ID : ACEC84F6FC9DD4B149EA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REALTORS PAC (RPAC)

**C.**

Mailing Address 430 N MICHIGAN AVE

City

CHICAGO

State

IL

Zip Code

60611-4011

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 18 2025

Transaction ID : A0CCDAFB1CB6448A995C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL BEER WHOLESALERS ASSOCIATION PAC****A.**Mailing Address 277 S WASHINGTON ST  
STE 500

City

ALEXANDRIA

State

VA

Zip Code

22314-3672

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
0	6		2	4		2	0	5	

Transaction ID : AC9FF0BA41E8745FBA01

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL COMMUNITY PHARMACISTS ASSOCIATION PAC****B.**

Mailing Address 100 DAINGERFIELD RD

City

ALEXANDRIA

State

VA

Zip Code

22314-3391

FEC ID number of contributing  
federal political committee.**C** C00030809

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : A10B703C434434CE8AAC

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION (NECAPAC)****C.**Mailing Address 1201 PENNSYLVANIA AVE NW  
FL 12

City

WASHINGTON

State

DC

Zip Code

20004-2401

FEC ID number of contributing  
federal political committee.**C** C00113811

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A599823EEF73F4A1A89B

Amount of Each Receipt this Period

5000.00

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

9500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL RESTAURANT ASSOCIATION PAC****A.**Mailing Address 2055 L ST NW  
STE 700City  
WASHINGTONState  
DCZip Code  
20036-4985FEC ID number of contributing  
federal political committee.**C** C00003764

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
06		30		2025

Transaction ID : A15E0DCA27B7542A2A51

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL RURAL LETTER CARRIERS' ASSOCIATION PAC (NRLCA PAC)****B.**Mailing Address 1630 DUKE ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3467FEC ID number of contributing  
federal political committee.**C** C00072025

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
06		30		2025

Transaction ID : AE0B2FC219AC142C29B4

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NCTA - THE INTERNET & TELEVISION ASSOCIATION PAC (NCTAPAC)****C.**Mailing Address 25 MASSACHUSETTS AVE NW  
STE 100City  
WASHINGTONState  
DCZip Code  
20001-1434FEC ID number of contributing  
federal political committee.**C** C00010082

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
05		12		2025

Transaction ID : A63BBA26A2B5844D5AF0

Amount of Each Receipt this Period

2500.00

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

7500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NETJETS ASSOCIATION OF SHARED AIRCRAFT PILOTS PAC; NJASAP PAC****A.**Mailing Address 2740 AIRPORT DR  
STE 330City  
COLUMBUSState  
OHZip Code  
43219-2286FEC ID number of contributing  
federal political committee.**C** C00488262

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : A95BE4E9CB5DE46C9A0F

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**NOVARTIS CORPORATION PAC**Mailing Address 801 PENNSYLVANIA AVE NW  
STE 700City  
WASHINGTONState  
DCZip Code  
20004-2723FEC ID number of contributing  
federal political committee.**C** C00033969

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
06		30		2025

Transaction ID : AB40724F797484E729F8

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)**Mailing Address 1550 LIBERTY RIDGE DR  
STE 115City  
CHESTERBROOKState  
PAZip Code  
19087-5573FEC ID number of contributing  
federal political committee.**C** C00562546

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
06		23		2025

Transaction ID : A511AA79C1E0946F4A75

Amount of Each Receipt this Period

2000.00

☐ Memo Item

4000.00

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NUCOR CORPORATION PAC

**A.** Mailing Address 1915 REXFORD RDCity  
CHARLOTTEState  
NCZip Code  
28211-3465FEC 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
0	6		0	5		2	0	2	5

Transaction ID : AAF89FB86C1C14BE78DF

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ONEIDA INDIAN NATION

**B.** Mailing Address 2037 DREAM CATCHER PLZCity  
ONEIDAState  
NYZip Code  
13421-2729FEC ID number of contributing  
federal political committee.**C**

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
0	5		1	2		2	0	2	5

Transaction ID : A729E81CDB16A42FF929

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PFIZER INC. PAC

**C.** Mailing Address 66 HUDSON BLVD ECity  
NEW YORKState  
NYZip Code  
10001-2188FEC ID number of contributing  
federal political committee.**C** C00016683

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A1E80ED7EA8EC4AA4B4E

Amount of Each Receipt this Period

2500.00

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

8500.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PHARMACEUTICAL RESEARCH &amp; MANUFACTURERS OF AMERICA BETTER GOVERNMENT COMMITTEE

**A.**Mailing Address 670 MAINE AVE SW  
STE 1000City  
WASHINGTONState  
DCZip Code  
20024-3556FEC ID number of contributing  
federal political committee.**C** C00021972

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
06		30		2025

Transaction ID : A45DFABFC4327495398D

Amount of Each Receipt this Period

1500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

PHILLIPS 66 PAC

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		19		2025

Transaction ID : AC37A0CD125C44EEC9D0

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

RAPTOR PAC

Mailing Address PO BOX 4864

City  
MIDLANDState  
TXZip Code  
79704-4864FEC ID number of contributing  
federal political committee.**C** C00749481

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
06		19		2025

Transaction ID : A57CDCE0092C042A5A06

Amount of Each Receipt this Period

2000.00

☐ Memo Item

6000.00

**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)  
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**REPUBLICAN MAINSTREET PARTNERSHIP PAC****A.** Mailing Address 411 NEW JERSEY AVE SE

City

WASHINGTON

State

DC

Zip Code

20003-4007

FEC ID number of contributing  
federal political committee.**C** C00165159

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A92E57A8EA35846D1BA7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ROCHE DIAGNOSTICS CORPORATION PAC (ROCHE DXPAC)****B.** Mailing Address 9115 HAGUE RD  
ROCHE

City

INDIANAPOLIS

State

IN

Zip Code

46256-1025

FEC ID number of contributing  
federal political committee.**C** C00072769

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
0	6		1	9		2	0	2	5

Transaction ID : A1E273E4848F5414DBFD

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SENECA NATION OF INDIANS****C.** Mailing Address PO BOX 231

City

SALAMANCA

State

NY

Zip Code

14779-0231

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

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
0	6		3	0		2	0	2	5

Transaction ID : A15177B8BD4734CC5AA3

Amount of Each Receipt this Period

3500.00

☐ Memo Item

5500.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SOUTHERN COMPANY EMPLOYEES PAC****A.**

Mailing Address 241 RALPH MCGILL BLVD NE

BIN 10111

City

ATLANTA

State

GA

Zip Code

30308-3374

FEC ID number of contributing  
federal political committee.**C** C00144774

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
0	6		3	0		2	0	2	5

Transaction ID : A890BF7ADF16241DEA65

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SOUTHWEST AIRLINES CO. PAC (SWAPAC)****B.**

Mailing Address PO BOX 36611

HDQ 4GA

City

DALLAS

State

TX

Zip Code

75235-1611

FEC ID number of contributing  
federal political committee.**C** C00341602

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A97584B8944F34928BE0

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SOUTHWEST AIRLINES PILOTS' ASSOCIATION PAC (SWAPA PAC)****C.**

Mailing Address 1450 EMPIRE CENTRAL DR

STE 737

City

DALLAS

State

TX

Zip Code

75247-4081

FEC ID number of contributing  
federal political committee.**C** C00360669

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A42490103D5F0461A803

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)..... ▶

6000.00

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SPACE EXPLORATION TECHNOLOGIES CORP. PAC****A.**Mailing Address 1155 F ST NW  
STE 475City  
WASHINGTONState  
DCZip Code  
20004-1343FEC ID number of contributing  
federal political committee.**C** C00411116

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		23		2025

Transaction ID : A9DBE92CFE7A7401EB69

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**THE FARM CREDIT COUNCIL PAC**Mailing Address 50 F ST NW  
STE 900City  
WASHINGTONState  
DCZip Code  
20001-1530FEC ID number of contributing  
federal political committee.**C** C00193631

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		29		2025

Transaction ID : A1CE65DFFD4044BC7A89

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**T-MOBILE US, INC. PAC (T-PAC)**Mailing Address 601 PENNSYLVANIA AVE NW  
STE 800City  
WASHINGTONState  
DCZip Code  
20004-2710FEC ID number of contributing  
federal political committee.**C** C00361758

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
06		30		2025

Transaction ID : A48E8696A3C9344CC93D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

11000.00

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TOGETHER FOR OUR MAJORITY PAC (TOMPAC)****A.** Mailing Address 8261 OLD POST RD E

City

EAST AMHERST

State

NY

Zip Code

14051-1584

FEC ID number of contributing  
federal political committee.**C** C00364174

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	5

Transaction ID : A7E54725844284C5FB7C

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)**TOYOTA MOTOR NORTH AMERICA, INC PAC (TOYOTA/LEXUS PAC)**Mailing Address 325 7TH ST NW  
STE 1000

City

WASHINGTON

State

DC

Zip Code

20004-2801

FEC ID number of contributing  
federal political committee.**C** C00542365

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A22C485E01A4340AAABE

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)**TRUCKING PAC OF THE AMERICAN TRUCKING ASSOCIATIONS INC.**Mailing Address 430 FIRST STREET SE  
SUITE 100

City

WASHINGTON

State

DC

Zip Code

20003-1826

FEC ID number of contributing  
federal political committee.**C** C00002881

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
0	6		3	0		2	0	2	5

Transaction ID : A32E4FCCC6AE245778E5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

7000.00

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC

**A.**

Mailing Address 9800 FREDERICKSBURG RD

City

SAN ANTONIO

State

TX

Zip Code

78288-0001

FEC ID number of contributing  
federal political committee.**C** C00164145

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  
06 / 30 / 2025D D / Y Y Y Y Y  
30 / 2025Y Y Y Y Y  
2025

Transaction ID : A77CD4B273B564D30BDB

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

UNITED STATES TELECOM ASSOCIATION PAC (TELECOMPAC)

Mailing Address 601 NEW JERSEY AVE NW  
STE 600

City

WASHINGTON

State

DC

Zip Code

20001-2993

FEC ID number of contributing  
federal political committee.**C** C00000984

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

Transaction ID : AC85189E157194F078DE

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

VALERO ENERGY CORPORATION PAC

Mailing Address 1 VALERO WAY

City

SAN ANTONIO

State

TX

Zip Code

78249-1616

FEC ID number of contributing  
federal political committee.**C** C00109546

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  
06 / 19 / 2025D D / Y Y Y Y Y  
19 / 2025Y Y Y Y Y  
2025

Transaction ID : AB53CC1AE77FF4BF8833

Amount of Each Receipt this Period

2500.00

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

5500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 101 OF 150

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

VSP HOLDING COMPANY INC PAC

**A.**

Mailing Address 3333 QUALITY DR

City

RANCHO CORDOVA

State

CA

Zip Code

95670-7985

FEC ID number of contributing  
federal political committee.

**C** C00493502

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  
06 23 2025

Transaction ID : AD307C892D32F4CEFA16

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT (WALPAC)

**B.**

Mailing Address 702 SW 8TH ST

City

BENTONVILLE

State

AR

Zip Code

72716-6209

FEC ID number of contributing  
federal political committee.

**C** C00093054

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  
06 30 2025

Transaction ID : A99E6CC02A32F4CF3B0C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

2000.00

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

181949.01

**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 102 OF 150

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LANGWORTHY CONGRESSIONAL VICTORY COMMITTEE****A.**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120FEC ID number of contributing  
federal political committee.**C** C00832188

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

76303.40

Date of Receipt

M M / D D / Y Y Y Y Y  
06 28 2025

Transaction ID : A46C3CEDDEEB84190A0A

Amount of Each Receipt this Period

4000.00

☐ Memo ItemTRANSFER OF JOINT FUNDRAISING PROCEEDS,  
SEE CONTRIBUTIONS BELOW**B.**

Full Name (Last, First, Middle Initial)

**DEGEORGE, JOSEPH, R., ,**

Mailing Address 3062 GUYANOGA RD

City  
BRANCHPORTState  
NYZip Code  
14418-9528FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

ST. PAULY TEXTILE

FOUNDER, CHAIRMAN &amp; CEO

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A1CAF76EB70D04732BA1

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**C.**

Full Name (Last, First, Middle Initial)

**ALLEN, SCOTT, S., , JR.**

Mailing Address 201 ADMIRALS WALK

City  
BUFFALOState  
NYZip Code  
14202-4331FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

LIPPES MATHIAS LLP

ATTORNEY

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 24 2025

Transaction ID : A7BEF0DB9FA8C4F89899

Amount of Each Receipt this Period

500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**SUBTOTAL** of Receipts This Page (optional)..... ▶

4000.00

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

4000.00

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

PAGE 103 OF 150

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

**A.**

Mailing Address 1030 DELTA BLVD

City

ATLANTA

State

GA

Zip Code

30354-1989

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

618.48

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2025

Transaction ID : AD1317014F6844855AAC

Amount of Each Receipt this Period

618.48

☐ Memo Item

REFUND: TRAVEL

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

618.48

618.48

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FIDELITY INVESTMENTS

**A.**

Mailing Address 245 SUMMER ST

City  
BOSTON

State  
MA

Zip Code  
02210-1133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6291.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2025

Transaction ID : AE7BFFC45C0034E088E6

Amount of Each Receipt this Period

- 3136.26

☐ Memo Item

LOSS ON INVESTMENT INCOME

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)..... ►

- 3136.26

- 3136.26



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

PAGE 105 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE N

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2025

City  
SEATTLEState  
WAZip Code  
98109-5210

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

45.89

Transaction ID : BE906441E28A24D0A955

☐ 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. AMAZON**

Mailing Address 410 TERRY AVE N

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2025

City  
SEATTLEState  
WAZip Code  
98109-5210

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

38.12

Transaction ID : B31BF963F7F8349A1A1A

☐ 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. AMAZON**

Mailing Address 410 TERRY AVE N

Date of Disbursement

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

City  
SEATTLEState  
WAZip Code  
98109-5210

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

169.48

Transaction ID : B104A6544A0C64FC4AD7

☐ 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).....▶

253.49

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

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

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.60

Transaction ID : B5F16380312F740DC9C1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.20

Transaction ID : BAEF9E6E3DF94438E956

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

256.40

Transaction ID : B55B43751CDAD46B0B20

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

310.20

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

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

PAGE 107 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.30

Transaction ID : B1C5543BC822C4A5BAB4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : B62392AADD91948C1A9F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

80.30

Transaction ID : BD607CAFC071A45AABBF

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

110.90

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

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

PAGE 108 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

140.30

Transaction ID : BDCF5A3E1F41C4DA0B90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : B4A661B754385410585F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

105.20

Transaction ID : B5CB8AB8018BA4EBC92B

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

265.80

**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)

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.30

Transaction ID : B3BF75A482CAE49E0A77

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.30

Transaction ID : BCFCB9C2879B74C76B25

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

70.60

Transaction ID : BF0F45B3D54124E81AB7

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

74.20

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

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

PAGE 110 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

100.60

Transaction ID : B6D45ADB460524B11A41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : B835E8C2733E24DEFB05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

261.80

Transaction ID : BC752323625ED4792830

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

402.70

**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 111 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

161.20

Transaction ID : BF760445F60B343A4A11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

52.99

Transaction ID : B89C3D791396C4EC6AB7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : B0384A09A4C1B43A09A9

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

224.18

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

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

PAGE 112 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

51.92

Transaction ID : BEF265E8079364EDFA68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.29

Transaction ID : B5C6A5F4A43BA4BE490B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

21.19

Transaction ID : B75FCEAF0D2CA4743903

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

83.40

**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 113 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : B0460462E42CE4EABB45

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.13

Transaction ID : B68623710007A480BB8D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.29

Transaction ID : B11E80E17A8824FA9841

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

40.41

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

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

PAGE 114 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21.19

Transaction ID : BEEF5951E45234535A2B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : BFE5A64E4F9184D90A76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.13

Transaction ID : BB0B3E34176DC49F6846

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

51.31

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

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

PAGE 115 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.29

Transaction ID : BE352E611D6CC4711894

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARENA LLC**Mailing Address 1260 E STRINGHAM AVE  
# 350City  
SALT LAKE CITYState  
UTZip Code  
84106-2963Purpose of Disbursement  
WEBSITE SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

673.75

Transaction ID : B33DD80CBEEB04659828

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ARENA LLC**Mailing Address 1260 E STRINGHAM AVE  
# 350City  
SALT LAKE CITYState  
UTZip Code  
84106-2963Purpose of Disbursement  
WEBSITE SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1260.00

Transaction ID : B8BFA844046D640BEBA5

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

1944.04

**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 116 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE INTERNATIONAL INC**

Mailing Address PO BOX 716045

City  
PHILADELPHIAState  
PAZip Code  
19171-6045Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2400.00

Transaction ID : B6033A2EEE9B04B3983E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BADD PIZZA CORP**

Mailing Address 2373 N FILLMORE ST

City  
ARLINGTONState  
VAZip Code  
22207-4953Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

248.94

Transaction ID : BA774AD28C19F4019BCA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BAKER, PAMELA, , ,**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B445D2A176B6C4A68901

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

3648.94

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

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

PAGE 117 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BAKER, PAMELA, , ,**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B4E3CBFF18D9A47FF933

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BAKER, PAMELA, , ,**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2420.00

Transaction ID : B8749D61C1CE0404C923

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BAKER, PAMELA, , ,**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B09B2E488D5844DB28B4

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

4420.00

**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 118 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BOBBY VANS STEAKHOUSE**

Mailing Address 809 15TH ST NW

City  
WASHINGTONState  
DCZip Code  
20005-2203Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

155.20

Transaction ID : B013EF42EEE0C490485C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROGHAMER COMPLIANCE**

Mailing Address PO BOX 72100

City  
NEWPORTState  
KYZip Code  
41072-0100Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2475.00

Transaction ID : BF2A35633EE27482CB19

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROGHAMER COMPLIANCE**

Mailing Address PO BOX 72100

City  
NEWPORTState  
KYZip Code  
41072-0100Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4343.18

Transaction ID : B3A03510D15604ED0A0D

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

6973.38

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

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

PAGE 119 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BROGHAMER COMPLIANCE**

Mailing Address PO BOX 72100

City  
NEWPORTState  
KYZip Code  
41072-0100Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3507.16

Transaction ID : B48EC7C8FAFE84A08991

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BUDGET CAR RENTAL**

Mailing Address 6 SYLVAN WAY

City  
PARSIPPANYState  
NJZip Code  
07054-3826Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

821.47

Transaction ID : BF82B763764BB45BC9D6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPELIANIS CONSULTING**

Mailing Address 221 N PATRICK ST

City  
ALEXANDRIAState  
VAZip Code  
22314-2440Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : B256F888DC7F247688B0

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

14328.63

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

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

PAGE 120 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPELIANIS CONSULTING**

Mailing Address 221 N PATRICK ST

City  
ALEXANDRIAState  
VAZip Code  
22314-2440Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : BB1B1877DAF854744825

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPELIANIS CONSULTING**

Mailing Address 221 N PATRICK ST

City  
ALEXANDRIAState  
VAZip Code  
22314-2440Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

12180.14

Transaction ID : B4FF40EA02EFF41BF9B7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

589.09

Transaction ID : B4B60F70F68384E6EBB4

☐ Memo Item

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

22769.23

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



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

PAGE 121 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

122.20

Transaction ID : BED1AF7A20CAE479B858

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

115.70

Transaction ID : B554EDC778D5A4A8B9C4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CASILIO COMMUNICATIONS LLC**Mailing Address 8899 MAIN ST  
SUITE 105City  
WILLIAMSVILLEState  
NYZip Code  
14221-7628Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.00

Transaction ID : B28F3B3A0EF3747CD97A

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

1487.90

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

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

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<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CASILIO COMMUNICATIONS LLC**Mailing Address 8899 MAIN ST  
SUITE 105City  
WILLIAMSVILLEState  
NYZip Code  
14221-7628Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.00

Transaction ID : B675FA7D218FA47A9BC1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CATTARAUGUS COUNTY REPUBLICAN COMMITTEE**

Mailing Address PO BOX 53

City  
LITTLE VALLEYState  
NYZip Code  
14755-0053Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

CATTARAUGUS COUNTY REPUBLICAN COMMITTEE

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B9F3B460B777343D987D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAUTAUQUA COUNTY REPUBLICAN COMMITTEE**

Mailing Address PO BOX 256

City  
RIPLEYState  
NYZip Code  
14775-0256Purpose of Disbursement  
ADVERTISING

001

Candidate Name

CHAUTAUQUA COUNTY REPUBLICAN COMMITTEE

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : B824A7BC894D04576BF7

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

1950.00

**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 123 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CHAUTAUQUA COUNTY REPUBLICAN COMMITTEE**

Mailing Address PO BOX 256

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

City  
RIPLEYState  
NYZip Code  
14775-0256

FEC Identification Number

C

Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name  
CHAUTAUQUA COUNTY REPUBLICAN COMMITTEECategory/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : B5EA482910EB64C7798C

☐ 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. CHRISTINE CZARNIK FOR COMPTROLLER**

Mailing Address PO BOX 64

Date of Disbursement

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

City  
BUFFALOState  
NYZip Code  
14201-0064

FEC Identification Number

C

Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name  
CHRISTINE CZARNIK FOR COMPTROLLERCategory/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B31D0010D585D48D5874

☐ 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. CONGRESSIONAL LIQUOR & DELI**

Mailing Address 404 1ST ST SE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20003-1826

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

381.69

Transaction ID : B619B402F49004F26B47

☐ 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).....▶

1131.69

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

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

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO RD

City  
WALTHAMState  
MAZip Code  
02451-7333Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

528.94

Transaction ID : BDDAE0C31B2664BFEB3D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO RD

City  
WALTHAMState  
MAZip Code  
02451-7333Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

528.94

Transaction ID : BB00B7D58409F416D991

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO RD

City  
WALTHAMState  
MAZip Code  
02451-7333Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

604.20

Transaction ID : BF22ACFB2E5EA42CCA06

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

1662.08

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

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

PAGE 125 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CORNING COUNTRY CLUB**

Mailing Address 2501 COUNTRY CLUB DR

City  
CORNINGState  
NYZip Code  
14830-3694Purpose of Disbursement  
EVENT COST - MEALS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1728.00

Transaction ID : B0DA78ECAB5D24CAA8EC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CORNING COUNTRY CLUB**

Mailing Address 2501 COUNTRY CLUB DR

City  
CORNINGState  
NYZip Code  
14830-3694Purpose of Disbursement  
EVENT COST - MEALS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1728.00

Transaction ID : B2A0708F52EB44869B64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DEMOCRACY ENGINE**Mailing Address 416 FLORIDA AVE NW  
STE 26418City  
WASHINGTONState  
DCZip Code  
20001-0516Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

67.20

Transaction ID : B76742B92C73E49B9B66

☐ Memo Item

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

3523.20

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

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

PAGE 126 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. DEMOCRACY ENGINE**Mailing Address 416 FLORIDA AVE NW  
STE 26418City  
WASHINGTONState  
DCZip Code  
20001-0516Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

46.20

Transaction ID : B63D11F44804D47C086C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE**Mailing Address 416 FLORIDA AVE NW  
STE 26418City  
WASHINGTONState  
DCZip Code  
20001-0516Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

15.30

Transaction ID : B6AE364D6D7384866AEC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DEMOCRACY ENGINE**Mailing Address 416 FLORIDA AVE NW  
STE 26418City  
WASHINGTONState  
DCZip Code  
20001-0516Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.05

Transaction ID : BF55EC6F976954F39AF7

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

61.55

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

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

PAGE 127 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. DEMOCRACY ENGINE**Mailing Address 416 FLORIDA AVE NW  
STE 26418City  
WASHINGTONState  
DCZip Code  
20001-0516Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B009EA0F52E604ACEB2F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ERIE COUNTY REPUBLICAN LEGISLATURE CAMPAIGN CMTE**

Mailing Address PO BOX 27

City  
BUFFALOState  
NYZip Code  
14201-0027Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name

ERIE COUNTY REPUBLICAN LEGISLATURE CAMPAIGN CMTE

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B51FF304AB6654AE1ADB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EXXONMOBIL**

Mailing Address 5959 LAS COLINAS BLVD

City  
IRVINGState  
TXZip Code  
75039-4202Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

33.58

Transaction ID : B809D2AAC21CB4526A6B

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

308.58

**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 128 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EXXONMOBIL**

Mailing Address 5959 LAS COLINAS BLVD

Date of Disbursement

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

City  
IRVINGState  
TXZip Code  
75039-4202

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

34.13

Transaction ID : B4161AA8B761D48D3826

☐ 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. EXXONMOBIL**

Mailing Address 5959 LAS COLINAS BLVD

Date of Disbursement

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

City  
IRVINGState  
TXZip Code  
75039-4202

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

26.42

Transaction ID : B839F582AF67249C2B09

☐ 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. FRIENDS OF PAT CHLUDZINSKI**

Mailing Address PO BOX 144

Date of Disbursement

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

City  
DEPEWState  
NYZip Code  
14043-0144

FEC Identification Number

C

Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name

FRIENDS OF PAT CHLUDZINSKI

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : BD0D0C51CFD294BCF951

☐ 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).....▶

560.55

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



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

PAGE 129 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. HAMBURG REPUBLICAN COMMITTEE**

Mailing Address PO BOX 947

Date of Disbursement

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

City  
HAMBURGState  
NYZip Code  
14075-0947

FEC Identification Number

C

Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name  
HAMBURG REPUBLICAN COMMITTEECategory/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : BFC62303B103A47BCBBB

☐ 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. HOPE TOTES INC**

Mailing Address 5055 HIDDEN VALLEY CT

Date of Disbursement

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

City  
CLARENCEState  
NYZip Code  
14031-1493

FEC Identification Number

C

Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1100.00

Transaction ID : B2850342D2A0B4C53B93

☐ 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. HOTEL WASHINGTON**

Mailing Address 515 15TH ST NW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20004-1006

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1204.76

Transaction ID : BDDEBF9839C454147846

☐ 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).....▶

3304.76

**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 130 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. KLOC'S GROVE INC.**

Mailing Address 1245 SENECA CREEK RD

City  
WEST SENECAState  
NYZip Code  
14224Purpose of Disbursement  
CATERING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BAB95FD74D85042D1AB5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LANGWORTHY, NICK, , ,**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120Purpose of Disbursement  
EXPENSE REIMBURSEMENT - SEE MEMOS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2056.67

Transaction ID : B1A39DFF5313C4A66A05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AT&T**

Mailing Address PO BOX 6416

City  
CAROL STREAMState  
ILZip Code  
60197-6416Purpose of Disbursement  
PHONE SERVICE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1570.00

Transaction ID : BE40DEFAC8F1C42D78AE

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

2556.67

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

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

PAGE 131 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. INTELLIUS**Mailing Address 1501 4TH AVE  
STE 400City  
SEATTLEState  
WAZip Code  
98101-3527Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

260.56

Transaction ID : BAE4D104701DA4A5E956

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. LOCKPORT LOCK MONSTERS 2014 AA**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : BC09B6E2D04204905A3B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

33.25

Transaction ID : BA8BD01F8A1D9483F83F

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

783.25

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

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

PAGE 132 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

37.22

Transaction ID : BC3FFFF7328434B39B75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

142.24

Transaction ID : B88E6220FFB2E46FE99A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

132.74

Transaction ID : B51B812A889FC49999AE

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

312.20

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

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

PAGE 133 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

195.42

Transaction ID : BFC022EA18C274161977

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.82

Transaction ID : B2CBFA0F029894E009BA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21.32

Transaction ID : B39A65B95C86C48E7B50

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

247.56

**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 134 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2941.13

Transaction ID : B2299C86A378840D48DB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2564.67

Transaction ID : B8C9E5519A30E498893C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

120.56

Transaction ID : B23054894ED2749C1992

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

5626.36

**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 135 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

206.96

Transaction ID : BCA32A242E311452788E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1196.14

Transaction ID : B7DA8453B36D24240BBF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NIAGARA COUNTY FEDERATION OF REPUBLICAN WOMEN**

Mailing Address 4520 BAER RD

City  
RANSOMVILLEState  
NYZip Code  
14131-9304Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name

NIAGARA COUNTY FEDERATION OF REPUBLICAN WOMEN

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B93A37828D9AD44C2A38

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

1653.10

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

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

PAGE 136 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. NYS FEDERATION OF REPUBLICAN WOMEN**

Mailing Address 25 BURBANK DR

City  
ORCHARD PARKState  
NYZip Code  
14127-2369Purpose of Disbursement  
ADVERTISING

001

Candidate Name  
NYS FEDERATION OF REPUBLICAN WOMENCategory/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : BB3BDB3397C884736B7C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OFFICE DEPOT**

Mailing Address 6600 N MILITARY TRL

City  
BOCA RATONState  
FLZip Code  
33496-2434Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

92.43

Transaction ID : B1CC9E93522C14DB99C6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OFFICE DEPOT**

Mailing Address 6600 N MILITARY TRL

City  
BOCA RATONState  
FLZip Code  
33496-2434Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

94.59

Transaction ID : B6611BE40662D4E479EB

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

487.02

**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 137 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT**

Mailing Address 6600 N MILITARY TRL

Date of Disbursement

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

City  
BOCA RATONState  
FLZip Code  
33496-2434

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

54.68

Transaction ID : BFA981ADD6A08461A9E5

☐ 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. RED RIVER CO**

Mailing Address 1110 TRINITY DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

City  
ALEXANDRIAState  
VAZip Code  
22314-4722

FEC Identification Number

C

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

400.00

Transaction ID : B8FE8A79005F54952A63

☐ 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. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

City  
DALLASState  
TXZip Code  
75235-1908

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

502.48

Transaction ID : B20F30251908245BB84E

☐ 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).....▶

957.16

**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 138 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235-1908Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

502.48

Transaction ID : B339B61CB064D4BA0B2A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TIOGA COUNTY REPUBLICAN COMMITTEE**

Mailing Address 6151 STATE RT 38

City  
NEWARK VALLEYState  
NYZip Code  
13811Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

TIOGA COUNTY REPUBLICAN COMMITTEE

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : BD8C692354730476CB82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

59.46

Transaction ID : B176B2B36E27C452DB89

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

811.94

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

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

PAGE 139 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.41

Transaction ID : B2C6D2038C8734686A40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30.96

Transaction ID : BC81D4BA2E80545BF914

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

47.03

Transaction ID : B8B536174254E4D53BAE

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

87.40

**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 140 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7.00

Transaction ID : BC02590A850F94008A98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.70

Transaction ID : B1A014AF6924346568B9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES INC**Mailing Address 233 S WACKER DR  
STE 710City  
CHICAGOState  
ILZip Code  
60606-6435Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

44.00

Transaction ID : BA2E7C563386F433F97D

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

61.70

**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 141 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES INC**Mailing Address 233 S WACKER DR  
STE 710City  
CHICAGOState  
ILZip Code  
60606-6435Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

188.48

Transaction ID : BFE8B49AF4668457A8EC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 475 LENFANT PLZ SW

City  
WASHINGTONState  
DCZip Code  
20260-0004Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

365.00

Transaction ID : BCCFAB0F323284CE8AB3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 475 LENFANT PLZ SW

City  
WASHINGTONState  
DCZip Code  
20260-0004Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.04

Transaction ID : B813A66D31EAE4098B6A

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

555.52

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

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

PAGE 142 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20260-0004

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

39.35

Transaction ID : BBEE1E5CD8AD64EF69B4

☐ 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. USPS**

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20260-0004

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

292.00

Transaction ID : B841B6E837D7A4A65B31

☐ 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. USPS**

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20260-0004

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

296.00

Transaction ID : BB168F186C0F946618F4

☐ 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).....▶

627.35

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

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

PAGE 143 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20260-0004

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

31.40

Transaction ID : BE0F675A60D254837904

☐ 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. WENDELVILLE FIRE COMPANY INC**

Mailing Address 7340 CAMPBELL BLVD

Date of Disbursement

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

City  
NORTH TONAWANDAState  
NYZip Code  
14120-9614

FEC Identification Number

C

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

139.25

Transaction ID : BDD8CBB32ECD840F0B1B

☐ 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. WENDELVILLE FIRE COMPANY INC**

Mailing Address 7340 CAMPBELL BLVD

Date of Disbursement

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

City  
NORTH TONAWANDAState  
NYZip Code  
14120-9614

FEC Identification Number

C

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

47.25

Transaction ID : BBA05C6E1FB9D476F941

☐ 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).....▶

217.90

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

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

PAGE 144 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

39.40

Candidate Name  
WINREDCategory/  
Type

Office Sought:

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

Disbursement For: 2026

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

Transaction ID : BEA5352E7E74A4282AF7

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

1.66

Candidate Name  
WINREDCategory/  
Type

Office Sought:

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

Disbursement For: 2026

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

Transaction ID : BE9B48ACE045F4D5FB91

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

4.10

Candidate Name  
WINREDCategory/  
Type

Office Sought:

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

Disbursement For: 2026

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

Transaction ID : B983DA82664964C2BA0D

☐ Memo Item

State:

District:

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

45.16

**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 145 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

0	2	7
---	---	---

Transaction ID : B2693E11E9D894DB78AC

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

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. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

0	0	1
---	---	---

Transaction ID : B2F5B4EF77D164C048F9

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

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. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

0	0	4
---	---	---

Transaction ID : BBE5D54B4994D4C4286A

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

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).....▶

0	3	2
---	---	---

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

0	3	2
---	---	---

**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 146 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

0	0	1
---	---	---

Transaction ID : B03B02398ACA94D8F91E

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

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. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

0	0	6
---	---	---

Transaction ID : BB17D1199F0634C38B74

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

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. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

0	0	7
---	---	---

Transaction ID : BE617871CB2554958A7E

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

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).....▶

0.14

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

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

PAGE 147 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

0	0	1
---	---	---

Transaction ID : B3ACB3D25D3964E58BDA

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

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. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

5	4	5
---	---	---

Transaction ID : BBD074F58712642E6835

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

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. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

9	8	5
---	---	---

Transaction ID : BFF6487ACA3E44403AB9

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

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).....▶

1	5	3	1
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**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 148 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

159.62
--------

Candidate Name  
WINREDCategory/  
Type

Office Sought:

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

Disbursement For: 2026

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

Transaction ID : BC3A46A12E6F343C1AEE

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

251.53
--------

Candidate Name  
WINREDCategory/  
Type

Office Sought:

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

Disbursement For: 2026

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

Transaction ID : B474EB16B9D2E42E1821

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

201.25
--------

Candidate Name  
WINREDCategory/  
Type

Office Sought:

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

Disbursement For: 2026

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

Transaction ID : BF2E856E97F764F66A36

☐ Memo Item

State:

District:

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

612.40

**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 149 OF 150

<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)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C C00694323

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

185.18

Candidate Name  
WINREDCategory/  
Type

Office Sought:

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

Disbursement For: 2026

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

Transaction ID : B591E1FEF26B04EA99E3

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINTLE, SARAH, , ,**

Mailing Address 25 HARP PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2025

City  
BUFFALOState  
NYZip Code  
14207-2615

FEC Identification Number

C

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

001

Amount of Each Disbursement this Period

600.00

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

Transaction ID : B7565CA294AD14E3CA74

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

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

Disbursement For:

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

Amount of Each Disbursement this Period

☐ Memo Item

State:

District:

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

785.18

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

86334.76

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

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. NRCC**

Mailing Address 320 1ST ST SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20003-1838

FEC Identification Number

C C00075820

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Amount of Each Disbursement this Period

90000.00

Candidate Name  
NRCCCategory/  
Type

Office Sought:

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

Disbursement For: 2026

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

Transaction ID : BA979F42D6F3D4B4A8F3

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

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

Disbursement For:

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

Amount of Each Disbursement this Period

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

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

Disbursement For:

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

Amount of Each Disbursement this Period

☐ Memo Item

State:

District:

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

90000.00

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

90000.00