

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

Office Use Only

1. NAME OF
COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type
over the lines.

12FE4M5

SHREVE FOR CONGRESS

ADDRESS (number and street)
▼

PO BOX 17182

Check if different
than previously
reported. (ACC)

SOUTHPORT

IN

46227

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00870949

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IN

06

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of

(c) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M 10

/ D 01

/ Y 2025

through

M 12

/ D 31

/ 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 MARTIN, KEVIN, , ,

Signature of Treasurer

MARTIN, KEVIN, , ,

Date

M 01

/ D 20

/ Y 2026

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
OnlyFEC FORM 3
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

SHREVE FOR CONGRESS

Report Covering the Period: From:

M M
10D D
01Y Y Y Y
2025

To:

M M
12D D
31Y Y Y Y
2025

6. Net Contributions (other than loans)

- (a) Total Contributions (other than loans) (from Line 11(e))
- (b) Total Contribution Refunds (from Line 20(d))
- (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))

COLUMN A
This Period**COLUMN B**
Election Cycle-to-Date

80661.06	300266.97
20.25	1036.42
80640.81	299230.55

7. Net Operating Expenditures

- (a) Total Operating Expenditures (from Line 17)
- (b) Total Offsets to Operating Expenditures (from Line 14).....
- (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))

79693.80	388519.52
0.51	690.29
79693.29	387829.23

8. Cash on Hand at Close of Reporting Period (from Line 27).....

2119426.30

9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)

0.00

10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)

7900000.00

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

SHREVE FOR CONGRESS

Report Covering the Period: From:

M M
10D D
01Y Y Y Y
2025

To:

M M
12D D
31Y Y Y Y
2025

I. RECEIPTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

- (a) Individuals/Persons Other Than Political Committees
 - (i) Itemized (use Schedule A)
 - (ii) Unitemized
 - (iii) TOTAL of contributions from individuals
- (b) Political Party Committees
- (c) Other Political Committees (such as PACs)
- (d) The Candidate
- (e) TOTAL CONTRIBUTIONS (other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))

23375.00	106678.71
286.06	1588.26
23661.06	108266.97
0.00	0.00
57000.00	192000.00
0.00	0.00
80661.06	300266.97
8680.96	8680.96

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

13. LOANS:

- (a) Made or Guaranteed by the Candidate
- (b) All Other Loans
- (c) TOTAL LOANS
(add Lines 13(a) and (b))

1000000.00	2000000.00
0.00	0.00
1000000.00	2000000.00

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

0.51	690.29
------	--------

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

0.00	0.00
------	------

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

1089342.53	2309638.22
------------	------------

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.....	79693.80	388519.52
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	20.25	36.42
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	20.25	1036.42
21. OTHER DISBURSEMENTS	0.00	500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	79714.05	390055.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1109797.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1089342.53
25. SUBTOTAL (add Line 23 and Line 24).....	2199140.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	79714.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2119426.30

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 76

(check only one)

 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)

SHREVE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) BROWNING, CHRIS, , , Mailing Address 1982 CALEDONIAN CT City GREENWOOD State IN Zip Code 46143-8249 FEC ID number of contributing federal political committee. C		Date of Receipt <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="checkbox"/> M 12 </div> <div style="text-align: center;"> <input type="checkbox"/> M 23 </div> <div style="text-align: center;"> <input type="checkbox"/> D D Y Y Y Y Y Y 2025 </div> </div> Transaction ID : A1E4AAB028935432EB41
Name of Employer VISIONQUEST EYECARE Occupation OPTOMETRIST Receipt For: 2026 <div style="display: flex; justify-content: space-between;"> <div style="flex: 1;"> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ </div> <div style="flex: 1; text-align: right;"> Election Cycle-to-Date ▼ 250.00 </div> </div>		Amount of Each Receipt this Period <div style="display: flex; align-items: center;"> <div style="flex: 1; background-color: #f0f0f0; height: 1.2em; margin-right: 10px;"></div> <div>250.00</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="flex: 1;"> <input type="checkbox"/> Memo Item </div> <div style="flex: 1;"></div> </div>
Full Name (Last, First, Middle Initial) DILLON, GEOFF, , , Mailing Address 7808 NORTH PENNSYLVANIA STREET City INDIANAPOLIS State IN Zip Code 46240 FEC ID number of contributing federal political committee. C		Date of Receipt <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="checkbox"/> M 10 </div> <div style="text-align: center;"> <input type="checkbox"/> M 29 </div> <div style="text-align: center;"> <input type="checkbox"/> D D Y Y Y Y Y Y 2025 </div> </div> Transaction ID : A7F050A13653348A5A36
Name of Employer HERITAGE CONSTRUCTION + MATERIALS Occupation CEO Receipt For: 2026 <div style="display: flex; justify-content: space-between;"> <div style="flex: 1;"> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ </div> <div style="flex: 1; text-align: right;"> Election Cycle-to-Date ▼ 6600.00 </div> </div>		Amount of Each Receipt this Period <div style="display: flex; align-items: center;"> <div style="flex: 1; background-color: #f0f0f0; height: 1.2em; margin-right: 10px;"></div> <div>- 3100.00</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="flex: 1;"> <input checked="" type="checkbox"/> Memo Item </div> <div style="flex: 1;"></div> </div> REDESIGNATION FROM
Full Name (Last, First, Middle Initial) DILLON, GEOFF, , , Mailing Address 7808 NORTH PENNSYLVANIA STREET City INDIANAPOLIS State IN Zip Code 46240 FEC ID number of contributing federal political committee. C		Date of Receipt <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="checkbox"/> M 10 </div> <div style="text-align: center;"> <input type="checkbox"/> M 29 </div> <div style="text-align: center;"> <input type="checkbox"/> D D Y Y Y Y Y Y 2025 </div> </div> Transaction ID : A215D992DF6DA4D908D6
Name of Employer HERITAGE CONSTRUCTION + MATERIALS Occupation CEO Receipt For: 2026 <div style="display: flex; justify-content: space-between;"> <div style="flex: 1;"> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼ </div> <div style="flex: 1; text-align: right;"> Election Cycle-to-Date ▼ 6600.00 </div> </div>		Amount of Each Receipt this Period <div style="display: flex; align-items: center;"> <div style="flex: 1; background-color: #f0f0f0; height: 1.2em; margin-right: 10px;"></div> <div>3100.00</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="flex: 1;"> <input checked="" type="checkbox"/> Memo Item </div> <div style="flex: 1;"></div> </div> REDESIGNATION TO
SUBTOTAL of Receipts This Page (optional)..... ►		<div style="display: flex; align-items: center;"> <div style="flex: 1; background-color: #f0f0f0; height: 1.2em; margin-right: 10px;"></div> <div>250.00</div> </div> <div style="display: flex; align-items: center;"> <div style="flex: 1; background-color: #f0f0f0; height: 1.2em; margin-right: 10px;"></div> <div>,</div> </div> <div style="display: flex; align-items: center;"> <div style="flex: 1; background-color: #f0f0f0; height: 1.2em; margin-right: 10px;"></div> <div>,</div> </div>
TOTAL This Period (last page this line number only)		<div style="display: flex; align-items: center;"> <div style="flex: 1; background-color: #f0f0f0; height: 1.2em; margin-right: 10px;"></div> <div>250.00</div> </div> <div style="display: flex; align-items: center;"> <div style="flex: 1; background-color: #f0f0f0; height: 1.2em; margin-right: 10px;"></div> <div>,</div> </div> <div style="display: flex; align-items: center;"> <div style="flex: 1; background-color: #f0f0f0; height: 1.2em; margin-right: 10px;"></div> <div>,</div> </div>

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 76

(check only one)

 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) DILLON, GEOFF, , , A. Mailing Address 7808 NORTH PENNSYLVANIA STREET		Date of Receipt M M / D D / Y Y Y Y 10 29 2025 Transaction ID : A59A4852C243647FA850
City INDIANAPOLIS State IN Zip Code 46240		Amount of Each Receipt this Period 6600.00
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer HERITAGE CONSTRUCTION + MATERIALS Occupation CEO		SEE REDESIGNATION
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 6600.00
Full Name (Last, First, Middle Initial) WINRED B. Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 10 29 2025 Transaction ID : A15F2D337F1474B9A863
City ARLINGTON State VA Zip Code 22219-1891		Amount of Each Receipt this Period 6600.00
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer Occupation		INTERMEDIARY
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 32705.50
Full Name (Last, First, Middle Initial) MCUALEY, PATRICK, B., , C. Mailing Address 5858 N COLLEGE AVE APT 223		Date of Receipt M M / D D / Y Y Y Y 12 18 2025 Transaction ID : AD8EBF64311134FCD853
City INDIANAPOLIS State IN Zip Code 46220-3092		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer BROAD RIPPLE CAPITAL Occupation COMMERCIAL REAL ESTATE		EARMARKED (NON-DIRECTED) THROUGH WINRED
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 525.00
SUBTOTAL of Receipts This Page (optional)..... ►		
TOTAL This Period (last page this line number only) ►		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 76

(check only one)

 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) WINRED A. Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 12 18 2025	
City ARLINGTON		State VA	Zip Code 22219-1891
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 32705.50	
Amount of Each Receipt this Period 25.00			
<input checked="" type="checkbox"/> Memo Item INTERMEDIARY			
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.			
Full Name (Last, First, Middle Initial) MCGRAW, CRAIG, , , B. Mailing Address 523 APACHE TRL		Date of Receipt M M / D D / Y Y Y Y 12 02 2025	
City MORGANVILLE		State NJ	Zip Code 07751-4632
FEC ID number of contributing federal political committee. C			
Name of Employer TRANS AMERICAN TRUCKING		Occupation VP OF SALES	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 2500.00	
Amount of Each Receipt this Period 1000.00			
<input checked="" type="checkbox"/> Memo Item EARMARKED (NON-DIRECTED) THROUGH WINRED			
Full Name (Last, First, Middle Initial) WINRED C. Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 12 02 2025	
City ARLINGTON		State VA	Zip Code 22219-1891
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 32705.50	
Amount of Each Receipt this Period 1000.00			
<input checked="" type="checkbox"/> 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) ►			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 76

(check only one)

 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) NESSEL, ARIEL, , , A. Mailing Address PO BOX 1128		Date of Receipt M M / D D / Y Y Y Y 10 31 2025 Transaction ID : ABB0B16DCC3BA477A963
City ROSS State CA Zip Code 94957		Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C		Memo Item EARMARKED (NON-DIRECTED) THROUGH WINRED
Name of Employer SELF-EMPLOYED Occupation ENTREPRENEUR		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00
Full Name (Last, First, Middle Initial) WINRED B. Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 10 31 2025 Transaction ID : A43CE06449AB44B5EBF2
City ARLINGTON State VA Zip Code 22219-1891		Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C		Memo Item INTERMEDIARY TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.
Name of Employer Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 32705.50
Full Name (Last, First, Middle Initial) SCHWARZMAN, CHRISTINE, , , C. Mailing Address 740 PARK AVE		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : A0AA4B5AEAD9D4CC3A2C
City NEW YORK State NY Zip Code 10021-4251		Amount of Each Receipt this Period 7000.00
FEC ID number of contributing federal political committee. C		Memo Item SEE REDESIGNATION
Name of Employer RETIRED Occupation RETIRED		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 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
 Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 76

(check only one)

 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)

SHREVE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) SCHWARZMAN, CHRISTINE, , , Mailing Address 740 PARK AVE City NEW YORK State NY Zip Code 10021-4251		Date of Receipt <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 12 23 2025 Transaction ID : AD3C81B75B653467F914
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input checked="" type="checkbox"/> Memo Item
Name of Employer RETIRED		Occupation RETIRED
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼
Full Name (Last, First, Middle Initial) SCHWARZMAN, CHRISTINE, , , Mailing Address 740 PARK AVE		Date of Receipt <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 12 23 2025 Transaction ID : A500F22E66D6049A09E1
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input checked="" type="checkbox"/> Memo Item
Name of Employer RETIRED		Occupation RETIRED
Receipt For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼
Full Name (Last, First, Middle Initial) SCHWARZMAN, STEPHEN, A., , Mailing Address 345 PARK AVE		Date of Receipt <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 12 23 2025 Transaction ID : A8A2155A0D35A4D7D8E7
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <input type="checkbox"/> Memo Item
Name of Employer BLACKSTONE		Occupation CEO
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼
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: PAGE 10 OF 76

(check only one)

 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)

SHREVE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) SCHWARZMAN, STEPHEN, A., , Mailing Address 345 PARK AVE		Date of Receipt <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 12 23 2025 Transaction ID : AF4416FEC4B364507BE0	
City NEW YORK		State NY	Zip Code 10154-0001
FEC ID number of contributing federal political committee.		<input type="text"/> C	
Name of Employer BLACKSTONE		Occupation CEO	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 7000.00	
Full Name (Last, First, Middle Initial) B. SCHWARZMAN, STEPHEN, A., , Mailing Address 345 PARK AVE			
City NEW YORK		State NY	Zip Code 10154-0001
FEC ID number of contributing federal political committee.		<input type="text"/> C	
Name of Employer BLACKSTONE		Occupation CEO	
Receipt For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 7000.00	
Full Name (Last, First, Middle Initial) C. Mailing Address			
City		State	Zip Code
FEC ID number of contributing federal political committee.		<input type="text"/> C	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	
SUBTOTAL of Receipts This Page (optional)..... ►			
TOTAL This Period (last page this line number only) ►			
Date of Receipt <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 12 23 2025 Transaction ID : AEB28B74BA1BC4B4DB11			
Amount of Each Receipt this Period <input type="text"/> - 3500.00			
<input checked="" type="checkbox"/> Memo Item			
REDESIGNATION FROM			
Date of Receipt <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y 12 23 2025			
Transaction ID : AEB28B74BA1BC4B4DB11			
Amount of Each Receipt this Period <input type="text"/> 3500.00			
<input checked="" type="checkbox"/> Memo Item			
REDESIGNATION TO			
Date of Receipt <input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y Y			
Amount of Each Receipt this Period <input type="text"/>			
<input checked="" type="checkbox"/> Memo Item			
SUBTOTAL of Receipts This Page (optional)..... ►			
TOTAL This Period (last page this line number only) ►			
<input type="text"/> 0.00			
<input type="text"/> 23375.00			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 76

 (check only one)
 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) AIRCRAFT MECHANICS FRATERNAL ASSOCIATION PAC (AMFA PAC) A. Mailing Address 7853 E ARAPAHOE CT STE 1100 City CENTENNIAL State CO Zip Code 80112-6834		Date of Receipt M M / D D / Y Y Y Y 12 15 2025 Transaction ID : A8647567D7DEF447BAA6
FEC ID number of contributing federal political committee. C C00782326		Amount of Each Receipt this Period 
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) AMERICAN BANKERS ASSOCIATION PAC (BANKPAC) B. Mailing Address 1333 NEW HAMPSHIRE AVE NW STE 700 City WASHINGTON State DC Zip Code 20036-1532		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : AC39F384CBC35499090B
FEC ID number of contributing federal political committee. C C00004275		Amount of Each Receipt this Period 
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) AMERICAN CRYSTAL SUGAR COMPANY PAC C. Mailing Address 101 NORTH 3RD STREET City MOORHEAD State MN Zip Code 56560-1952		Date of Receipt M M / D D / Y Y Y Y 12 15 2025 Transaction ID : A3C367E5819984A14857
FEC ID number of contributing federal political committee. C C00110338		Amount of Each Receipt this Period 
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
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: PAGE 12 OF 76

 (check only one)
 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY PAC (PT-PAC) A. Mailing Address 3030 POTOMAC AVE STE 100 City ALEXANDRIA State VA Zip Code 22305-3085		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : A65FE8D291F8F4524A7C
FEC ID number of contributing federal political committee. C C00012880		Amount of Each Receipt this Period 
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) AMERICAN SUGAR CANE LEAGUE OF USA, INC PAC B. Mailing Address P O DRAWER 938 City THIBODAUX State LA Zip Code 70302-0938		Date of Receipt M M / D D / Y Y Y Y 11 18 2025 Transaction ID : A3F9D19011343443AAA5
FEC ID number of contributing federal political committee. C C00081414		Amount of Each Receipt this Period 
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) AMERICAN WATERWAYS OPERATORS-PAC C. Mailing Address 801 N QUINCY ST STE 200 City ARLINGTON State VA Zip Code 22203-1708		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : A9BA07415F267462E936
FEC ID number of contributing federal political committee. C C00034678		Amount of Each Receipt this Period 
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
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: PAGE 13 OF 76

 (check only one)
 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) CATERPILLAR INC. PAC (CATPAC) A. Mailing Address 5205 N O CONNOR BLVD STE 100 City IRVING State TX Zip Code 75039-3712		Date of Receipt M M / D D / Y Y Y Y 12 15 2025 Transaction ID : A4794E0BCA3684A53B88
FEC ID number of contributing federal political committee. C C00148031		Amount of Each Receipt this Period  2500.00
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼  2500.00
Full Name (Last, First, Middle Initial) EDP RENEWABLES NORTH AMERICA LLC PAC (AKA EDPR NA PAC) B. Mailing Address 1501 MCKINNEY ST STE 1300 City HOUSTON State TX Zip Code 77010-4010		Date of Receipt M M / D D / Y Y Y Y 12 15 2025 Transaction ID : AFA5A54684C774BB8990
FEC ID number of contributing federal political committee. C C00452755		Amount of Each Receipt this Period  1000.00
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼  1000.00
Full Name (Last, First, Middle Initial) ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC) C. Mailing Address 1001 PENNSYLVANIA AVE NW STE 710 City WASHINGTON State DC Zip Code 20004-2513		Date of Receipt M M / D D / Y Y Y Y 11 18 2025 Transaction ID : AE3A008DECE88454B968
FEC ID number of contributing federal political committee. C C00197228		Amount of Each Receipt this Period  1500.00
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼  5500.00
SUBTOTAL of Receipts This Page (optional)..... ►		 5000.00
TOTAL This Period (last page this line number only)		 5000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 76

 (check only one)
 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) ELI LILLY AND COMPANY PAC		Date of Receipt <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> </div> <div style="text-align: center;"> 12 18 2025 </div> </div> Transaction ID : A4E5D2267CCC14EDFB99		
A. Mailing Address LILLY CORPORATE CENTER				
City INDIANAPOLIS State IN Zip Code 46285-0001				
FEC ID number of contributing federal political committee. C C00082792				
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00		
Full Name (Last, First, Middle Initial) FLORIDA SUGAR CANE LEAGUE PAC				
B. Mailing Address 1301 PENNSYLVANIA AVE NW STE 401				
City WASHINGTON State DC Zip Code 20004-1701				
FEC ID number of contributing federal political committee. C C00012328				
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) HALEON US HOLDINGS LLC PAC				
C. Mailing Address 184 LIBERTY CORNER RD				
City WARREN State NJ Zip Code 07059-6796				
FEC ID number of contributing federal political committee. C C00824631				
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		
SUBTOTAL of Receipts This Page (optional)..... ► <div style="display: flex; justify-content: flex-end; align-items: center;"> <div style="text-align: right; margin-right: 10px;"> 4000.00 </div> <div style="border: 1px solid gray; width: 100px; height: 10px; background-color: #f0f0f0;"></div> </div>				
TOTAL This Period (last page this line number only)..... ► <div style="display: flex; justify-content: flex-end; align-items: center;"> <div style="text-align: right; margin-right: 10px;"> 4000.00 </div> <div style="border: 1px solid gray; width: 100px; height: 10px; background-color: #f0f0f0;"></div> </div>				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 76

 (check only one)
 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) HALL RENDER KILLIAN HEATH & LYMAN PC EMPLOYEE PAC AKA HALLWAY PAC FEDERAL		Date of Receipt M M / D D / Y Y Y Y 12 15 2025		
A. Mailing Address 500 N MERIDIAN ST STE 400 City INDIANAPOLIS IN INDIANAPOLIS		Transaction ID : A43DDBE19AB44418EA55		
FEC ID number of contributing federal political committee. C C00552083		Amount of Each Receipt this Period 1000.00		
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) HEARTDOCPAC		Date of Receipt M M / D D / Y Y Y Y 12 15 2025		
B. Mailing Address 3253 SUTTON PL NW APT A City WASHINGTON DC WASHINGTON		Transaction ID : A3EA2AE7C951B4AF4892		
FEC ID number of contributing federal political committee. C C00523381		Amount of Each Receipt this Period 1000.00		
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) HONEYWELL INTERNATIONAL PAC		Date of Receipt M M / D D / Y Y Y Y 12 23 2025		
C. Mailing Address 101 CONSTITUTION AVE NW STE 500 City WASHINGTON DC WASHINGTON		Transaction ID : A6A19F31EE66F4241965		
FEC ID number of contributing federal political committee. C C00096156		Amount of Each Receipt this Period 1000.00		
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 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 Page

FOR LINE NUMBER: PAGE 16 OF 76

 (check only one)
 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC A. Mailing Address 1750 NEW YORK AVE NW City WASHINGTON State DC Zip Code 20006-5305 FEC ID number of contributing federal political committee. C C00029447 Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Date of Receipt M M / D D / Y Y Y Y 10 29 2025 Transaction ID : A63AF9BE240454CB2BAB
Full Name (Last, First, Middle Initial) LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC B. Mailing Address 2121 CRYSTAL DR STE 100 City ARLINGTON State VA Zip Code 22202-3706 FEC ID number of contributing federal political committee. C C00303024 Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : A60B6B66BAC3940CCAC4
Full Name (Last, First, Middle Initial) MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC) C. Mailing Address 7525 RED RIVER RD City WAHPETON State ND Zip Code 58075-9705 FEC ID number of contributing federal political committee. C C00164939 Name of Employer Receipt For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		Date of Receipt M M / D D / Y Y Y Y 12 15 2025 Transaction ID : A68BF7C8D398B4926B7D
SUBTOTAL of Receipts This Page (optional)..... ►		Amount of Each Receipt this Period 2500.00 <input type="checkbox"/> Memo Item
TOTAL This Period (last page this line number only)		Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item
 		Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item
 		Amount of Each Receipt this Period 4500.00 <input type="checkbox"/> Memo Item

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 76

(check only one)

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

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) NATIONAL ASPHALT PAVEMENT ASSOCIATION PAC (NAPA-PAC)		Date of Receipt <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 33.33%;">M</td> <td style="width: 33.33%;">M</td> <td style="width: 33.33%;">/</td> <td style="width: 33.33%;">D</td> <td style="width: 33.33%;">D</td> <td style="width: 33.33%;">/</td> <td style="width: 33.33%;">Y</td> <td style="width: 33.33%;">Y</td> <td style="width: 33.33%;">Y</td> </tr> <tr> <td>12</td> <td></td> <td></td> <td>23</td> <td></td> <td></td> <td>2025</td> <td></td> <td></td> </tr> </table> Transaction ID : ABFAB38B26DA94575B7B	M	M	/	D	D	/	Y	Y	Y	12			23			2025		
M	M	/	D	D	/	Y	Y	Y												
12			23			2025														
A. Mailing Address 800 MAINE AVE SW STE 800 City WASHINGTON State DC Zip Code 20024-2806		Amount of Each Receipt this Period <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33.33%;">2000.00</td> <td style="width: 33.33%;">,</td> <td style="width: 33.33%;">,</td> </tr> </table> <input type="checkbox"/> Memo Item	2000.00	,	,															
2000.00	,		,																	
FEC ID number of contributing federal political committee. C C00444539																				
Name of Employer Occupation																				
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																				
Election Cycle-to-Date ▼ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33.33%;">4500.00</td> <td style="width: 33.33%;">,</td> <td style="width: 33.33%;">,</td> </tr> </table>		4500.00	,	,																
4500.00	,	,																		
Full Name (Last, First, Middle Initial) NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION AMERICA'S ELECTRIC COOPERATIVES PAC		Date of Receipt <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 33.33%;">M</td> <td style="width: 33.33%;">M</td> <td style="width: 33.33%;">/</td> <td style="width: 33.33%;">D</td> <td style="width: 33.33%;">D</td> <td style="width: 33.33%;">/</td> <td style="width: 33.33%;">Y</td> <td style="width: 33.33%;">Y</td> </tr> <tr> <td>12</td> <td></td> <td></td> <td>15</td> <td></td> <td></td> <td>2025</td> <td></td> </tr> </table> Transaction ID : A394759B74D53432193D	M	M	/	D	D	/	Y	Y	12			15			2025			
M	M		/	D	D	/	Y	Y												
12				15			2025													
B. Mailing Address 4301 WILSON BLVD																				
City ARLINGTON State VA Zip Code 22203-4419																				
FEC ID number of contributing federal political committee. C C00002972																				
Name of Employer Occupation																				
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																				
Election Cycle-to-Date ▼ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33.33%;">1000.00</td> <td style="width: 33.33%;">,</td> <td style="width: 33.33%;">,</td> </tr> </table>		1000.00	,	,																
1000.00	,	,																		
Full Name (Last, First, Middle Initial) NATIONAL SHOOTING SPORTS FOUNDATION, INC. PAC (NSSF PAC)		Date of Receipt <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 33.33%;">M</td> <td style="width: 33.33%;">M</td> <td style="width: 33.33%;">/</td> <td style="width: 33.33%;">D</td> <td style="width: 33.33%;">D</td> <td style="width: 33.33%;">/</td> <td style="width: 33.33%;">Y</td> <td style="width: 33.33%;">Y</td> </tr> <tr> <td>12</td> <td></td> <td></td> <td>23</td> <td></td> <td></td> <td>2025</td> <td></td> </tr> </table> Transaction ID : A8EEDAC453C77478EB29	M	M	/	D	D	/	Y	Y	12			23			2025			
M	M		/	D	D	/	Y	Y												
12				23			2025													
C. Mailing Address 400 N CAPITOL ST NW STE 475																				
City WASHINGTON State DC Zip Code 20001-1593																				
FEC ID number of contributing federal political committee. C C00480863																				
Name of Employer Occupation																				
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																				
Election Cycle-to-Date ▼ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33.33%;">1000.00</td> <td style="width: 33.33%;">,</td> <td style="width: 33.33%;">,</td> </tr> </table>		1000.00	,	,																
1000.00	,	,																		
SUBTOTAL of Receipts This Page (optional)..... ►		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33.33%;">4000.00</td> <td style="width: 33.33%;">,</td> <td style="width: 33.33%;">,</td> </tr> </table>	4000.00	,	,															
4000.00	,	,																		
TOTAL This Period (last page this line number only)		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33.33%;">,</td> <td style="width: 33.33%;">,</td> <td style="width: 33.33%;">,</td> </tr> </table>	,	,	,															
,	,	,																		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 76

 (check only one)
 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) NOVARTIS CORPORATION PAC A. Mailing Address 801 PENNSYLVANIA AVE NW STE 700 City WASHINGTON State DC Zip Code 20004-2723		Date of Receipt M M / D D / Y Y Y Y 12 18 2025 Transaction ID : ACE00148E03A140FDA6
FEC ID number of contributing federal political committee. C C00033969		Amount of Each Receipt this Period 1000.00
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 1000.00
Full Name (Last, First, Middle Initial) PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC) B. Mailing Address 6363 OAK TREE BLVD City INDEPENDENCE State OH Zip Code 44131-2556		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : AF0DCB7787C664430B11
FEC ID number of contributing federal political committee. C C00082271		Amount of Each Receipt this Period 1000.00
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 1000.00
Full Name (Last, First, Middle Initial) RAPTOR PAC C. Mailing Address PO BOX 4864 City MIDLAND State TX Zip Code 79704-4864		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : A5EA61C88FA994C88A39
FEC ID number of contributing federal political committee. C C00749481		Amount of Each Receipt this Period 1000.00
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 1000.00
SUBTOTAL of Receipts This Page (optional)..... ►		3000.00
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 Page

FOR LINE NUMBER: PAGE 19 OF 76

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

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) ROLLS-ROYCE NORTH AMERICA HOLDINGS INC. PAC (ROLLS-ROYCE NORTH AMERICA PAC)		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>31</td><td></td><td></td><td>20</td><td>25</td><td></td><td></td></tr> </table> Transaction ID : A72D6A675859A4E2096D		M	M	/	D	D	/	Y	Y	Y	Y	12			31			20	25		
M	M	/	D	D	/	Y	Y	Y	Y														
12			31			20	25																
A. Mailing Address 1900 RESTON METRO PLZ STE 400 City RESTON State VA Zip Code 20190-5950		Amount of Each Receipt this Period <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>1000.00</td></tr> </table> <input type="checkbox"/> Memo Item		1000.00																			
1000.00																							
FEC ID number of contributing federal political committee. C C00296822																							
Name of Employer Occupation																							
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>2000.00</td></tr> </table>		2000.00																			
2000.00																							
Full Name (Last, First, Middle Initial) SCALISE FOR CONGRESS		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>23</td><td></td><td></td><td>20</td><td>25</td><td></td><td></td></tr> </table> Transaction ID : A2198E7885F1C4478861		M	M	/	D	D	/	Y	Y	Y	Y	12			23			20	25		
M	M	/	D	D	/	Y	Y	Y	Y														
12			23			20	25																
Mailing Address PO BOX 23219 City NEW ORLEANS State LA Zip Code 70183-0219		Amount of Each Receipt this Period <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>2000.00</td></tr> </table> <input type="checkbox"/> Memo Item		2000.00																			
2000.00																							
FEC ID number of contributing federal political committee. C C00394957																							
Name of Employer Occupation																							
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>4000.00</td></tr> </table>		4000.00																			
4000.00																							
Full Name (Last, First, Middle Initial) SCALISE FOR CONGRESS		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>23</td><td></td><td></td><td>20</td><td>25</td><td></td><td></td></tr> </table> Transaction ID : AE6A83486B4FA406192F		M	M	/	D	D	/	Y	Y	Y	Y	12			23			20	25		
M	M	/	D	D	/	Y	Y	Y	Y														
12			23			20	25																
Mailing Address PO BOX 23219 City NEW ORLEANS State LA Zip Code 70183-0219		Amount of Each Receipt this Period <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>2000.00</td></tr> </table> <input type="checkbox"/> Memo Item		2000.00																			
2000.00																							
FEC ID number of contributing federal political committee. C C00394957																							
Name of Employer Occupation																							
Receipt For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>4000.00</td></tr> </table>		4000.00																			
4000.00																							
SUBTOTAL of Receipts This Page (optional)..... ►		<table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>5000.00</td></tr> </table>		5000.00																			
5000.00																							
TOTAL This Period (last page this line number only)		<table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>5000.00</td></tr> </table>		5000.00																			
5000.00																							

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 76

 (check only one)
 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) SCIENCE APPLICATIONS INTERNATIONAL CORPORATION VOLUNTARY PAC A. Mailing Address 12010 SUNSET HILLS RD		Date of Receipt M M / D D / Y Y Y Y 12 31 2025 Transaction ID : A9EB824FF8ECF45FEB61
City RESTON State VA Zip Code 20190-5856		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00300418		Memo Item
Name of Employer		Occupation
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00
Full Name (Last, First, Middle Initial) SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC (SIGMA: AMERICA'S LEADING FUEL MARKETERS...) B. Mailing Address 1330 BRADDOCK PL STE 501		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : A0450A732524E4DA9962
City ALEXANDRIA State VA Zip Code 22314-1650		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C C00120030		Memo Item
Name of Employer		Occupation
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 2500.00
Full Name (Last, First, Middle Initial) TEXANS FOR JODEY ARRINGTON C. Mailing Address PO BOX 6687		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : ABC9CBDB73C59497F9D9
City LUBBOCK State TX Zip Code 79493-6687		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00588657		Memo Item
Name of Employer		Occupation
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00
SUBTOTAL of Receipts This Page (optional)..... ►		4500.00
TOTAL This Period (last page this line number only)		4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 OF 76

 (check only one)
 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) THE BOEING COMPANY PAC A. Mailing Address 929 LONG BRIDGE DR		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : A9538D989CABF4D5F835
City ARLINGTON State VA Zip Code 22202-4208 FEC ID number of contributing federal political committee. C C00142711		Amount of Each Receipt this Period  Memo Item
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) THE EYE OF THE TIGER PAC B. Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : A73FC1592A5B74510B6C
City ARLINGTON State VA Zip Code 22219-1891 FEC ID number of contributing federal political committee. C C00467431		Amount of Each Receipt this Period  Memo Item
Name of Employer Receipt For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) THE EYE OF THE TIGER PAC C. Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 Transaction ID : ABA055C1E087A4726A6A
City ARLINGTON State VA Zip Code 22219-1891 FEC ID number of contributing federal political committee. C C00467431		Amount of Each Receipt this Period  Memo Item
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
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: PAGE 23 OF 76

(check only one)

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

SHREVE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) TEAM SHREVE Mailing Address PO BOX 17182		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>31</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : A2FFB0C7148194F03B8B	M	M	/	D	D	/	Y	Y	Y	Y	12			31			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
12			31			2025																
City SOUTHPORT		State IN Zip Code 46227																				
FEC ID number of contributing federal political committee.		C C00887372																				
Name of Employer		Occupation																				
Receipt For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 8680.96																				
Full Name (Last, First, Middle Initial) MALMSTROM, JULIE, , ,		Amount of Each Receipt this Period 2375.19																				
B. Mailing Address 103 N OLIVE ST		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>24</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : AF055164C663844E2ACC	M	M	/	D	D	/	Y	Y	Y	Y	12			24			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
12			24			2025																
City META		State MO Zip Code 65058-1019																				
FEC ID number of contributing federal political committee.		C C																				
Name of Employer SNK REAL PROPERTY HOLDINGS, LLC		Occupation PARTNER																				
Receipt For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 7000.00																				
Full Name (Last, First, Middle Initial) SNK REAL PROPERTY HOLDINGS LLC		Amount of Each Receipt this Period 3500.00																				
C. Mailing Address 103 OLIVE ST		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>24</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : A787284542F934957B1F	M	M	/	D	D	/	Y	Y	Y	Y	12			24			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
12			24			2025																
City META		State MO Zip Code 65058-1019																				
FEC ID number of contributing federal political committee.		C C																				
Name of Employer		Occupation																				
Receipt For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 7000.00																				
Full Name (Last, First, Middle Initial) SNK REAL PROPERTY HOLDINGS LLC		Amount of Each Receipt this Period 3500.00																				
SUBTOTAL of Receipts This Page (optional)..... ►		<input type="checkbox"/> Memo Item																				
TOTAL This Period (last page this line number only)		2375.19																				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 OF 76

(check only one)

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

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) TEAM SHREVE A. Mailing Address PO BOX 17182		Date of Receipt <table border="1"> <tr> <td>M</td> <td>M</td> <td>/</td> <td>D</td> <td>D</td> <td>/</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td>12</td> <td></td> <td></td> <td>31</td> <td></td> <td></td> <td>20</td> <td>25</td> <td></td> <td></td> </tr> </table> Transaction ID : AE8CEE45682B54412942		M	M	/	D	D	/	Y	Y	Y	Y	12			31			20	25		
M	M	/	D	D	/	Y	Y	Y	Y														
12			31			20	25																
City SOUTHPORT		State IN	Zip Code 46227																				
FEC ID number of contributing federal political committee.		C C00887372																					
Name of Employer		Occupation																					
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 8680.96																					
Full Name (Last, First, Middle Initial) REPUBLICAN MAINSTREET PARTNERSHIP PAC B. Mailing Address 411 NEW JERSEY AVE SE		Amount of Each Receipt this Period 6305.77																					
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 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00																					
Full Name (Last, First, Middle Initial) REPUBLICAN MAINSTREET PARTNERSHIP PAC C. Mailing Address 411 NEW JERSEY AVE SE		Amount of Each Receipt this Period 1000.00																					
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 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00																					
SUBTOTAL of Receipts This Page (optional)..... ►		Date of Receipt <table border="1"> <tr> <td>M</td> <td>M</td> <td>/</td> <td>D</td> <td>D</td> <td>/</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td>05</td> <td></td> <td></td> <td>09</td> <td></td> <td></td> <td>20</td> <td>25</td> <td></td> <td></td> </tr> </table> Transaction ID : A42F35D8E35B84616B77		M	M	/	D	D	/	Y	Y	Y	Y	05			09			20	25		
M	M	/	D	D	/	Y	Y	Y	Y														
05			09			20	25																
TOTAL This Period (last page this line number only)		Amount of Each Receipt this Period 6305.77																					

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 OF 76

(check only one)

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

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) REPUBLICAN MAINSTREET PARTNERSHIP PAC A. Mailing Address 411 NEW JERSEY AVE SE		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>07</td><td></td><td></td><td>18</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : AA1A58A8CBA2943D68D1	M	M	/	D	D	/	Y	Y	Y	Y	07			18			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
07			18			2025																
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 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00																				
		Amount of Each Receipt this Period 1000.00																				
		<input checked="" type="checkbox"/> Memo Item [TEAM SHREVE - C00887372]																				
Full Name (Last, First, Middle Initial) MALMSTROM, JULIE, , , B. Mailing Address 103 N OLIVE ST		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>24</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : A4F4018A66DAC4A2AA76	M	M	/	D	D	/	Y	Y	Y	Y	12			24			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
12			24			2025																
City META		State MO Zip Code 65058-1019																				
FEC ID number of contributing federal political committee. C																						
Name of Employer SNK REAL PROPERTY HOLDINGS, LLC		Occupation PARTNER																				
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 7000.00																				
		Amount of Each Receipt this Period 3500.00																				
		<input checked="" type="checkbox"/> Memo Item PARTNER ATTRIBUTION FOR SNK REAL PROPERTY HOLDINGS LLC [TEAM SHREVE]																				
Full Name (Last, First, Middle Initial) RICHARDSON, CHARLES, T., , C. Mailing Address 435 VIRGINIA AVENUE APT. 105		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>02</td><td></td><td></td><td>28</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : A87AEBA41FDB454A92C	M	M	/	D	D	/	Y	Y	Y	Y	02			28			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
02			28			2025																
City INDIANAPOLIS		State IN Zip Code 46203-1965																				
FEC ID number of contributing federal political committee. C																						
Name of Employer RETIRED		Occupation RETIRED																				
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 1041.98																				
		Amount of Each Receipt this Period 1041.98																				
		<input checked="" type="checkbox"/> Memo Item [TEAM SHREVE - C00887372]																				
SUBTOTAL of Receipts This Page (optional)..... ►		0.00																				
TOTAL This Period (last page this line number only) ►		0.00																				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 OF 76

(check only one)

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

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) MORGAN, MATTHEW, , , A. Mailing Address 3664 ABNEY POINT DR		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>03</td><td></td><td></td><td>18</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : A4070E74379C8460CAE2	M	M	/	D	D	/	Y	Y	Y	Y	03			18			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
03			18			2025																
City ZIONSVILLE		State IN Zip Code 46077-7707																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%;"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Name of Employer BARNES & THORNBURG LLP		Occupation ATTORNEY																				
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1" style="width: 100%;"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Full Name (Last, First, Middle Initial) 19TH STAR STATE SOLUTIONS LLC B. Mailing Address 1102 N BEVILLE AVE		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>03</td><td></td><td></td><td>21</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : ACC6FCB1C81E54ADCBF1	M	M	/	D	D	/	Y	Y	Y	Y	03			21			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
03			21			2025																
City INDIANAPOLIS		State IN Zip Code 46201-1356																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%;"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
Name of Employer		Occupation																				
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1" style="width: 100%;"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
Full Name (Last, First, Middle Initial) WILLEY, JOHN, , , C. Mailing Address 1102 N BEVILLE AVE		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>03</td><td></td><td></td><td>21</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : A9CEC164B7C7F4B23860	M	M	/	D	D	/	Y	Y	Y	Y	03			21			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
03			21			2025																
City INDIANAPOLIS		State IN Zip Code 46201-1356																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%;"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
Name of Employer 19TH STAR STATE SOLUTIONS LLC		Occupation EXECUTIVE																				
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <table border="1" style="width: 100%;"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
SUBTOTAL of Receipts This Page (optional).....►		<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00																			
0.00																						
TOTAL This Period (last page this line number only).....►		<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00																			
0.00																						

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 76

(check only one)

 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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) TALLEY, DOUGLAS, C., , A. Mailing Address 13878 WATERWAY BLVD		Date of Receipt M M / D D / Y Y Y Y 03 21 2025 Transaction ID : AC3EE86367BC14254AC5
City FISHERS FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period  250.00
Name of Employer NATIONAL BANK OF INDIANAPOLIS Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation BANKER Election Cycle-to-Date ▼  250.00
Full Name (Last, First, Middle Initial) SNK REAL PROPERTY HOLDINGS LLC B. Mailing Address 103 OLIVE ST		Date of Receipt M M / D D / Y Y Y Y 12 24 2025 Transaction ID : A76EAB00748E14CFBA90
City META FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period  3500.00
Name of Employer Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼  7000.00
Full Name (Last, First, Middle Initial) C. Mailing Address		Date of Receipt M M / D D / Y Y Y Y
City FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period  0.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼  8680.96
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: PAGE 28 OF 76

(check only one)

 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHREVE, JEFFERSON, , , Mailing Address PO BOX 17182		Date of Receipt M M / D D / Y Y Y Y Y 12 29 2025	
City SOUTHPORT		State IN	Zip Code 46227
FEC ID number of contributing federal political committee.		C H4IN06185	
Name of Employer SELF EMPLOYED		Occupation INVESTOR	
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 2000000.00	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)..... ►			
TOTAL This Period (last page this line number only) ►			
Amount of Each Receipt this Period 1000000.00			
Memo Item CANDIDATE LOAN			
Date of Receipt M M / D D / Y Y Y Y Y 12 29 2025			
Amount of Each Receipt this Period 1000000.00			
Memo Item			
Date of Receipt M M / D D / Y Y Y Y Y 12 29 2025			
Amount of Each Receipt this Period 1000000.00			
Memo Item			
Date of Receipt M M / D D / Y Y Y Y Y 12 29 2025			
Amount of Each Receipt this Period 1000000.00			
Memo Item			
Date of Receipt M M / D D / Y Y Y Y Y 12 29 2025			
Amount of Each Receipt this Period 1000000.00			
Memo Item			

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

PAGE 29 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ADOBE

Mailing Address 345 PARK AVE

City SAN JOSE State CA Zip Code 95110-2704

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

32.09

Transaction ID : B2CA5581162DD4C23A15

Memo Item

Full Name (Last, First, Middle Initial)

B. ADOBE

Mailing Address 345 PARK AVE

City SAN JOSE State CA Zip Code 95110-2704

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

32.09

Transaction ID : B08C75A07FF7347CA8C0

Memo Item

Full Name (Last, First, Middle Initial)

C. ADOBE

Mailing Address 345 PARK AVE

City SAN JOSE State CA Zip Code 95110-2704

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

32.09

Transaction ID : BBBD9A4BDA2124738A01

Memo Item

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

96.27

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 Page

FOR LINE NUMBER:
(check only one)

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

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMAZON

Mailing Address 410 TERRY AVE N

City SEATTLE State WA Zip Code 98109-5210

Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M 10 / D D 21 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

197.00

Transaction ID : BE1BC8EA00BC2483682B

Memo Item

B. ARISTOTLE INTERNATIONAL, INC.

Mailing Address PO BOX 716045

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : BC1D69F708B914DC3A5B

Memo Item

C. ARISTOTLE INTERNATIONAL, INC.

Mailing Address PO BOX 716045

City PHILADELPHIA State PA Zip Code 19171-6045

Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : B4AFC23723A58449D8CF

Memo Item

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

4697.00

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 31 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ASPIRE JOHNSON COUNTY

Mailing Address 1499 WINDHORST WAY
STE 160

City GREENWOOD State IN Zip Code 46143-8800

Purpose of Disbursement
EVENT TICKETS/SPONSORSHIP

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 11 / D D 04 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

114.13

Transaction ID : B045FD5C5BA3441C1B47

Memo Item

Full Name (Last, First, Middle Initial)

B. BROGHAMER COMPLIANCE

Mailing Address PO BOX 72100

City NEWPORT State KY Zip Code 41072-0100

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 10 / D D 03 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

2558.48

Transaction ID : BE284FCA6F284469E8F8

Memo Item

Full Name (Last, First, Middle Initial)

C. BROGHAMER COMPLIANCE

Mailing Address PO BOX 72100

City NEWPORT State KY Zip Code 41072-0100

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 11 / D D 07 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

2475.00

Transaction ID : BA46E06584B8C4497954

Memo Item

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

5147.61

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

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

PAGE 32 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BROGHAMER COMPLIANCE

Mailing Address PO BOX 72100

City
NEWPORT

State
KY

Zip Code
41072-0100

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2475.00

Transaction ID : B43E8AD33E0B2482683B

Memo Item

Full Name (Last, First, Middle Initial)

B. BULLHORN COMMUNICATIONS

Mailing Address 5016 WEBSTER

City
OMAHA

State
NE

Zip Code
68132-2210

Purpose of Disbursement
DIGITAL CONSULTING/WEBSITE DEVELOPMENT

001

Candidate Name

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1200.00

Transaction ID : BDB9AA74FEE404CDFA5F

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTON

State
DC

Zip Code
20003-1801

Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

140.87

Transaction ID : B1BA93BAE63DD47899BB

Memo Item

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

3815.87

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

 FOR LINE NUMBER:
 (check only one)

 PAGE 33 OF 76
 17 18 19a 19b
 20a 20b 20c 21

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB Mailing Address 300 1ST ST SE City WASHINGTON State DC Zip Code 20003-1801 Purpose of Disbursement FOOD/BEVERAGE Candidate Name Category/ Type 001 Office Sought: <input type="checkbox"/> House Disbursement For: 2026 <input type="checkbox"/> Senate Primary <input type="checkbox"/> General <input type="checkbox"/> President Other (specify) ▼ State: District:		Date of Disbursement M M / D D / Y Y Y Y 11 18 2025
		FEC Identification Number C
Amount of Each Disbursement this Period 345.53 Transaction ID : B60B0528D373E4836A11 <input type="checkbox"/> Memo Item		Amount of Each Disbursement this Period 683.31 Transaction ID : BEDE13C55DE0F4F52ABC <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB Mailing Address 300 1ST ST SE City WASHINGTON State DC Zip Code 20003-1801 Purpose of Disbursement FOOD/BEVERAGE Candidate Name Category/ Type 001 Office Sought: <input type="checkbox"/> House Disbursement For: 2026 <input type="checkbox"/> Senate Primary <input type="checkbox"/> General <input type="checkbox"/> President Other (specify) ▼ State: District:		Date of Disbursement M M / D D / Y Y Y Y 12 16 2025
Full Name (Last, First, Middle Initial) C. FIGMA INC Mailing Address 760 MARKET ST FL 10 City SAN FRANCISCO State CA Zip Code 94102-2300 Purpose of Disbursement SOFTWARE Candidate Name Category/ Type 001 Office Sought: <input type="checkbox"/> House Disbursement For: 2026 <input type="checkbox"/> Senate Primary <input type="checkbox"/> General <input type="checkbox"/> President Other (specify) ▼ State: District:		Date of Disbursement M M / D D / Y Y Y Y 12 01 2025
SUBTOTAL of Disbursements This Page (optional)..... ►		FEC Identification Number C
TOTAL This Period (last page this line number only)..... ►		Amount of Each Disbursement this Period 20.00 Transaction ID : B0A7055805F274CAB85D <input type="checkbox"/> Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ►		1048.84
TOTAL This Period (last page this line number only)..... ►		1048.84

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

 FOR LINE NUMBER:
 (check only one)

 PAGE 34 OF 76
 17 18 19a 19b
 20a 20b 20c 21

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FIGMA INC
 Mailing Address 760 MARKET ST
 FL 10

City SAN FRANCISCO State CA Zip Code 94102-2300

 Purpose of Disbursement
 SOFTWARE

001

Candidate Name

Category/
Type
 Office Sought: House
 Senate
 President

 Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B81586C03E8764AB1A37

 Memo Item**B. GODADDY.COM**

Mailing Address 2155 E GODADDY WAY

City TEMPE State AZ Zip Code 85284-3409

 Purpose of Disbursement
 SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type
 Office Sought: House
 Senate
 President

 Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

 M M 10 / D D 17 / Y Y Y Y Y
 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

263.75

Transaction ID : BCA87B530030340C7A69

 Memo Item**C. GODADDY.COM**

Mailing Address 2155 E GODADDY WAY

City TEMPE State AZ Zip Code 85284-3409

 Purpose of Disbursement
 SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type
 Office Sought: House
 Senate
 President

 Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

203.88

Transaction ID : BC4EF7BE0A64149A1B92

 Memo Item

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

487.63

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 35 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GODADDY.COM

Mailing Address 2155 E GODADDY WAY

City TEMPE	State AZ	Zip Code 85284-3409
---------------	-------------	------------------------

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

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 Other (specify) ▼
---	---

State: District:

Date of Disbursement

M M 11 / D D 17 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

11.99

Transaction ID : B485DCDA8537B4002A0B

Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 2155 E GODADDY WAY

City TEMPE	State AZ	Zip Code 85284-3409
---------------	-------------	------------------------

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

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 Other (specify) ▼
---	---

State: District:

Date of Disbursement

M M 12 / D D 17 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

11.99

Transaction ID : B8C61CA40BFBD4C1CAF5

Memo Item

Full Name (Last, First, Middle Initial)

C. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW	State CA	Zip Code 94043-1351
-----------------------	-------------	------------------------

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

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 Other (specify) ▼
---	---

State: District:

Date of Disbursement

M M 10 / D D 02 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

24.02

Transaction ID : BF2874546ECF1444CBED

Memo Item

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

48.00

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 36 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043-1351

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.15

Transaction ID : BED2B4AB5EBDD4386BAB

Memo Item

Full Name (Last, First, Middle Initial)

B. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043-1351

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 02 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

24.15

Transaction ID : B0A6DBA4345484C498A3

Memo Item

Full Name (Last, First, Middle Initial)

C. HARCOURT OUTLINES, INC.

Mailing Address PO BOX 128

City MILROY State IN Zip Code 46156-0128

Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 10 / D D 03 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

299.60

Transaction ID : B16F2A1D9EA6649DBBCF

Memo Item

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

347.90

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 Page

 FOR LINE NUMBER:
 (check only one)

PAGE 37 OF 76

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

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HOLT Kamp, JOHN, , ,

Mailing Address PO BOX 17182

 City
 SOUTHPORT

 State
 IN

 Zip Code
 46227

 Purpose of Disbursement
 MILEAGE REIMBURSEMENT

001

Candidate Name

 Category/
 Type

 Office Sought:
 House
 Senate
 President

Disbursement For: 2026

 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. HOLT Kamp, JOHN, , ,

Mailing Address PO BOX 17182

 City
 SOUTHPORT

 State
 IN

 Zip Code
 46227

 Purpose of Disbursement
 PAYROLL

001

Candidate Name

 Category/
 Type

 Office Sought:
 House
 Senate
 President

Disbursement For: 2026

 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. HOLT Kamp, JOHN, , ,

Mailing Address PO BOX 17182

 City
 SOUTHPORT

 State
 IN

 Zip Code
 46227

 Purpose of Disbursement
 PAYROLL

001

Candidate Name

 Category/
 Type

 Office Sought:
 House
 Senate
 President

Disbursement For: 2026

 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

 M M / D D / Y Y Y Y Y
 10 / 03 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

163.17

Transaction ID : BB0AD89F08AE242CF902

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B63902CCF0D144730A3E

Memo Item

Date of Disbursement

 M M / D D / Y Y Y Y Y
 11 / 26 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B0240C11103E84C56A3A

Memo Item

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

4163.17

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 Page

 FOR LINE NUMBER:
 (check only one)

 PAGE 38 OF 76
 17 18 19a 19b
 20a 20b 20c 21

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOLTKAMP, JOHN, , , Mailing Address PO BOX 17182 City SOUTHPORT State IN Zip Code 46227 Purpose of Disbursement PAYROLL Candidate Name Category/ Type 001 Office Sought: <input type="checkbox"/> House Disbursement For: 2026 <input type="checkbox"/> Senate Primary <input type="checkbox"/> General <input type="checkbox"/> President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) B. HOUSE GIFT SHOP Mailing Address 15 INDEPENDENCE AVE SE City WASHINGTON State DC Zip Code 20515-6001 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/ Type 001 Office Sought: <input type="checkbox"/> House Disbursement For: 2026 <input type="checkbox"/> Senate Primary <input type="checkbox"/> General <input type="checkbox"/> President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. I360 Mailing Address 300 CLAREDON BLVD STE 800 City ARLINGTON State VA Zip Code 22201 Purpose of Disbursement SOFTWARE Candidate Name Category/ Type 001 Office Sought: <input type="checkbox"/> House Disbursement For: 2026 <input type="checkbox"/> Senate Primary <input type="checkbox"/> General <input type="checkbox"/> President Other (specify) ▼ State: District:		Date of Disbursement M M 12 / D D 26 / Y Y Y Y Y FEC Identification Number C Amount of Each Disbursement this Period 2000.00 Transaction ID : B9780E0E31D6A459B8CA <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) B. HOUSE GIFT SHOP Mailing Address 15 INDEPENDENCE AVE SE City WASHINGTON State DC Zip Code 20515-6001 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/ Type 001 Office Sought: <input type="checkbox"/> House Disbursement For: 2026 <input type="checkbox"/> Senate Primary <input type="checkbox"/> General <input type="checkbox"/> President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) C. I360 Mailing Address 300 CLAREDON BLVD STE 800 City ARLINGTON State VA Zip Code 22201 Purpose of Disbursement SOFTWARE Candidate Name Category/ Type 001 Office Sought: <input type="checkbox"/> House Disbursement For: 2026 <input type="checkbox"/> Senate Primary <input type="checkbox"/> General <input type="checkbox"/> President Other (specify) ▼ State: District:		Date of Disbursement M M 11 / D D 17 / Y Y Y Y Y FEC Identification Number C Amount of Each Disbursement this Period 610.10 Transaction ID : BE03B7443A1014BFA906 <input type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) C. I360 Mailing Address 300 CLAREDON BLVD STE 800 City ARLINGTON State VA Zip Code 22201 Purpose of Disbursement SOFTWARE Candidate Name Category/ Type 001 Office Sought: <input type="checkbox"/> House Disbursement For: 2026 <input type="checkbox"/> Senate Primary <input type="checkbox"/> General <input type="checkbox"/> President Other (specify) ▼ State: District:		Date of Disbursement M M 10 / D D 29 / Y Y Y Y Y FEC Identification Number C Amount of Each Disbursement this Period 170.00 Transaction ID : B3724922C379E4DFEB0B <input type="checkbox"/> Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ►		2780.10
TOTAL This Period (last page this line number only)..... ►		2780.10

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

 FOR LINE NUMBER:
 (check only one)

 PAGE 39 OF 76
 17 18 19a 19b
 20a 20b 20c 21

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. I360

 Mailing Address 300 CLAREDON BLVD
 STE 800

 City
 ARLINGTON

 State
 VA

 Zip Code
 22201

 Purpose of Disbursement
 SOFTWARE

001

Candidate Name

 Category/
 Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2026

 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

170.00

Transaction ID : BC0DB746558E843B7837

Memo Item

B. I360

 Mailing Address 300 CLAREDON BLVD
 STE 800

 City
 ARLINGTON

 State
 VA

 Zip Code
 22201

 Purpose of Disbursement
 SOFTWARE

001

Candidate Name

 Category/
 Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2026

 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

170.00

Transaction ID : B8014EB7D23674683942

Memo Item

C. ILILI RESTAURANT

Mailing Address 100 DISTRICT SQUARE SW

 City
 WASHINGTON

 State
 DC

 Zip Code
 20024-2807

 Purpose of Disbursement
 FOOD/BEVERAGE

001

Candidate Name

 Category/
 Type

Office Sought:

 House
 Senate
 President

Disbursement For: 2026

 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M 11 / D D 19 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1571.80

Transaction ID : B7E042FE14DD54B02954

Memo Item

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

1911.80

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 Page

 FOR LINE NUMBER:
 (check only one)

 PAGE 40 OF 76
 17 18 19a 19b
 20a 20b 20c 21

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ILILI RESTAURANT

Mailing Address 100 DISTRICT SQUARE SW

City WASHINGTON State DC Zip Code 20024-2807

 Purpose of Disbursement
 FOOD/BEVERAGE

001

Candidate Name

Category/
Type
 Office Sought: House Disbursement For: 2026
 Senate Primary
 President General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. INDIANA REPUBLICAN STATE COMMITTEEMailing Address 101 W OHIO ST
STE 2200

City INDIANAPOLIS State IN Zip Code 46204-4207

 Purpose of Disbursement
 EVENT TICKETS

001

Candidate Name
INDIANA REPUBLICAN STATE COMMITTEECategory/
Type
 Office Sought: House Disbursement For: 2026
 Senate Primary
 President General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. INDIANAPOLIS BUSINESS JOURNALMailing Address 1 MONUMENT CIR
STE 300

City INDIANAPOLIS State IN Zip Code 46204-3026

 Purpose of Disbursement
 SUBSCRIPTION

001

Candidate Name

Category/
Type
 Office Sought: House Disbursement For: 2026
 Senate Primary
 President General
 Other (specify) ▼

State: District:

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

4108.48

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

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2948.48

Transaction ID : B4FA5E78D355D477993A

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B62A4F2BAA0064B61A74

Memo Item

Date of Disbursement

M M 11 / D D 17 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

160.00

Transaction ID : B9BDFC63E1B764458AF4

Memo Item

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

PAGE 41 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KB STRATEGIC GROUP

Mailing Address 3213 DUKE ST

City ALEXANDRIA State VA Zip Code 22314-4533

Purpose of Disbursement
FINANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 11 / D D 07 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

18600.00

Transaction ID : B2A1EE1EBE63C4406B2C

Memo Item

Full Name (Last, First, Middle Initial)

B. KIRWANS ON THE WHARF

Mailing Address 749 WHARF ST SW

City WASHINGTON State DC Zip Code 20024-3433

Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 22 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

236.25

Transaction ID : B22FF7ECFDFED4D91933

Memo Item

Full Name (Last, First, Middle Initial)

C. LIMESTONE STRATEGIES

Mailing Address 5750 CASTLE CREEK PARKWAY NORTH DR
STE 367

City INDIANAPOLIS State IN Zip Code 46250-4336

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 10 / D D 03 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : BBE082D927F2A43939E5

Memo Item

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

22836.25

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 42 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LIMESTONE STRATEGIES

Mailing Address 5750 CASTLE CREEK PARKWAY NORTH DR
STE 367

City INDIANAPOLIS State IN Zip Code 46250-4336

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4011.91

Transaction ID : B786D57A2E7404D7E9A0

Memo Item

Full Name (Last, First, Middle Initial)

B. LIMESTONE STRATEGIES

Mailing Address 5750 CASTLE CREEK PARKWAY NORTH DR
STE 367

City INDIANAPOLIS State IN Zip Code 46250-4336

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B397010D2DC234F7C91B

Memo Item

Full Name (Last, First, Middle Initial)

C. LIMESTONE STRATEGIES

Mailing Address 5750 CASTLE CREEK PARKWAY NORTH DR
STE 367

City INDIANAPOLIS State IN Zip Code 46250-4336

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B381B2EDEA1B64F5ABFA

Memo Item

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

12011.91

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

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

PAGE 43 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LOS CABALLEROS

Mailing Address 308 PENNSYLVANIA AVE. SE

City WASHINGTON State DC Zip Code 20003-1147

Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

706.30

Transaction ID : BEB30931EAD01472CB52

Memo Item

Full Name (Last, First, Middle Initial)

B. LYFT

Mailing Address 185 BERRY ST
STE 400

City SAN FRANCISCO State CA Zip Code 94107-1725

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 10 / D D 14 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

19.85

Transaction ID : BCFB02C93A2CD45F19C7

Memo Item

Full Name (Last, First, Middle Initial)

C. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE

City ATLANTA State GA Zip Code 30308-1884

Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 10 / D D 27 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

135.00

Transaction ID : BD8C53F19A4624C00BE6

Memo Item

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

861.15

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 44 OF 76

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

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE

City ATLANTA State GA Zip Code 30308-1884

 Purpose of Disbursement
 SUBSCRIPTION

001

Candidate Name

 Category/
Type

 Office Sought: House
 Senate
 President Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE

City ATLANTA State GA Zip Code 30308-1884

 Purpose of Disbursement
 SUBSCRIPTION

001

Candidate Name

 Category/
Type

 Office Sought: House
 Senate
 President Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. MARION COUNTY REPUBLICAN CENTRAL COMMITTEE

 Mailing Address 101 W OHIO ST
 STE 2200

City INDIANAPOLIS State IN Zip Code 46204-4207

 Purpose of Disbursement
 EVENT SPONSORSHIP

001

 Candidate Name
 MARION COUNTY REPUBLICAN CENTRAL COMMITTEE

 Category/
Type

 Office Sought: House
 Senate
 President Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1270.00

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

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

135.00

Transaction ID : B5822B816A44E4A67A52

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

135.00

Transaction ID : BF35C2E69286047F5B99

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B83AA26C0F2EE450F9A6

Memo Item

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 45 OF 76

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

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OAKEN BARREL BREWING COMPANY

 Mailing Address 50 AIRPORT PKWY
 STE L

City GREENWOOD State IN Zip Code 46143-1438

 Purpose of Disbursement
 FOOD/BEVERAGE

001

Candidate Name

 Category/
 Type

 Office Sought: House Primary Disbursement For: 2026
 Senate General
 President Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. OLD NATIONAL BANK

Mailing Address 1 MONUMENT CIR, STE 150

City INDIANAPOLIS State IN Zip Code 46204-3030

 Purpose of Disbursement
 BANK FEES

001

Candidate Name

 Category/
 Type

 Office Sought: House Primary Disbursement For: 2026
 Senate General
 President Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. OLD NATIONAL BANK

Mailing Address 1 MONUMENT CIR, STE 150

City INDIANAPOLIS State IN Zip Code 46204-3030

 Purpose of Disbursement
 BANK FEES

001

Candidate Name

 Category/
 Type

 Office Sought: House Primary Disbursement For: 2026
 Senate General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 11 / D D 26 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

81.49

Transaction ID : B6F686625DEA5489F9ED

Memo Item

Date of Disbursement

M M 10 / D D 17 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

128.00

Transaction ID : B82975F60D603458B94A

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

128.00

Transaction ID : BC9620DD4BD5444EBA8A

Memo Item

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

337.49

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 46 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OLD NATIONAL BANK

Mailing Address 1 MONUMENT CIR, STE 150

City INDIANAPOLIS State IN Zip Code 46204-3030

Purpose of Disbursement
BANK FEES

001

Candidate Name

Category/
Type

Office Sought: House Primary Disbursement For: 2026
 Senate General
 President Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. PANERA BREAD

Mailing Address 1400 S HIGHWAY DR

City FENTON State MO Zip Code 63026-2281

Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought: House Primary Disbursement For: 2026
 Senate General
 President Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. PATTERSON CONSULTING, LLC

Mailing Address 4666 BOULEVARD PL

City INDIANAPOLIS State IN Zip Code 46208-3550

Purpose of Disbursement
FINANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House Primary Disbursement For: 2026
 Senate General
 President Other (specify) ▼

State: District:

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

4866.69

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

Date of Disbursement

12 / 19 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

128.00

Transaction ID : B2F432440AF5743ADBD2

Memo Item

Date of Disbursement

10 / 23 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

82.69

Transaction ID : B3B0DAFF136A34890947

Memo Item

Date of Disbursement

10 / 03 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

4656.00

Transaction ID : BA936B83C37E94371B68

Memo Item

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

PAGE 47 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PATTERSON CONSULTING, LLC

Mailing Address 4666 BOULEVARD PL

City INDIANAPOLIS	State IN	Zip Code 46208-3550
----------------------	-------------	------------------------

Purpose of Disbursement
FINANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House Senate President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
--	---

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : BC74A8C3975774B3198C

Memo Item

Full Name (Last, First, Middle Initial)

B. SLACK TECHNOLOGIES, INC

Mailing Address 500 HOWARD STREET

City SAN FRANCISCO	State CA	Zip Code 94105-3000
-----------------------	-------------	------------------------

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House Senate President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
--	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
10 17 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

77.29

Transaction ID : B5767C8AE29394E90847

Memo Item

Full Name (Last, First, Middle Initial)

C. SLACK TECHNOLOGIES, INC

Mailing Address 500 HOWARD STREET

City SAN FRANCISCO	State CA	Zip Code 94105-3000
-----------------------	-------------	------------------------

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House Senate President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
--	---

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
11 17 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

84.39

Transaction ID : B93AE7B54811A4FA594A

Memo Item

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

3161.68

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 48 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SLACK TECHNOLOGIES, INC

Mailing Address 500 HOWARD STREET

City SAN FRANCISCO State CA Zip Code 94105-3000

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M 12 / D D 17 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

81.68

Transaction ID : B02F9536C535248C5927

Memo Item

B. SQUARESPACE

Mailing Address 225 VARICK ST
FL 12

City NEW YORK State NY Zip Code 10014-4383

Purpose of Disbursement
WEBSITE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

201.60

Transaction ID : B11CC36F3997C4D6EB9F

Memo Item

C. SQUARESPACE

Mailing Address 225 VARICK ST
FL 12

City NEW YORK State NY Zip Code 10014-4383

Purpose of Disbursement
WEBSITE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

201.60

Transaction ID : B656AE1F68AA642D99D8

Memo Item

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

484.88

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 49 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SQUARESPACE

Mailing Address 225 VARICK ST
FL 12

City
NEW YORK State
NY Zip Code
10014-4383

Purpose of Disbursement
WEBSITE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 09 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

201.60

Transaction ID : BDFBEE851D01544AEB51

Memo Item

Full Name (Last, First, Middle Initial)

B. TRIBUTE STORE

Mailing Address 315 RAEMISCH RD

City
WAUNAKEE State
WI Zip Code
53597-9571

Purpose of Disbursement
BEREAVEMENT FLOWERS

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M 10 / D D 28 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

82.93

Transaction ID : B179EC75E591944DBA3C

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD ST

City
SAN FRANCISCO State
CA Zip Code
94158-2203

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

36.98

Transaction ID : B432A0FB499CE47089D5

Memo Item

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

321.51

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

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

PAGE 50 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD ST

City SAN FRANCISCO State CA Zip Code 94158-2203

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 17 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

15.80

Transaction ID : B3A75581CFFB74DDCB56

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD ST

City SAN FRANCISCO State CA Zip Code 94158-2203

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 17 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

26.28

Transaction ID : B0BD797D45D044264A86

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD ST

City SAN FRANCISCO State CA Zip Code 94158-2203

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 22 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

33.18

Transaction ID : BB819EEFA8CF94543977

Memo Item

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

75.26

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

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

PAGE 51 OF 76

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD ST

City SAN FRANCISCO State CA Zip Code 94158-2203

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 22 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

30.62

Transaction ID : B6AF22981CE294779B66

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD ST

City SAN FRANCISCO State CA Zip Code 94158-2203

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 22 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

29.99

Transaction ID : BB3118276D869490CAF8

Memo Item

Full Name (Last, First, Middle Initial)

C. UNBOUNCE

Mailing Address 100 GARFIELD ST

City DENVER State CO Zip Code 80206-5597

Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : B74C5AD6FC80B4C079D8

Memo Item

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

159.61

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

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNBOUNCE

Mailing Address 100 GARFIELD ST

City DENVER	State CO	Zip Code 80206-5597
----------------	-------------	------------------------

Purpose 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 Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : B8A4BFA6FFDBF4A6EB6A

Memo Item

B. UNBOUNCE

Mailing Address 100 GARFIELD ST

City DENVER	State CO	Zip Code 80206-5597
----------------	-------------	------------------------

Purpose 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 Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : BDF887F5C752D4320A88

Memo Item

C. UPS

Mailing Address 55 GLENLAKE PKWY

City ATLANTA	State GA	Zip Code 30328-3474
-----------------	-------------	------------------------

Purpose of Disbursement
SHIPPING/DELIVERY

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 Other (specify) ▼
---	--

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

257.35

Transaction ID : B96CF8C29886E4D9481A

Memo Item

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

455.35

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 Page

 FOR LINE NUMBER:
 (check only one)

 PAGE 53 OF 76
 17 18 19a 19b
 20a 20b 20c 21

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WE THE PIZZA

Mailing Address 305 PENNSYLVANIA AVE. SE

City WASHINGTON State DC Zip Code 20003-1148

 Purpose of Disbursement
 FOOD/BEVERAGE

001

Candidate Name

Category/
Type
 Office Sought: House Disbursement For: 2026
 Senate Primary
 President General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City SOUTHPORT State IN Zip Code 46227

 Purpose of Disbursement
 EXPENSE REIMBURSEMENT - MILEAGE

001

Candidate Name

Category/
Type
 Office Sought: House Disbursement For: 2026
 Senate Primary
 President General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City SOUTHPORT State IN Zip Code 46227

 Purpose of Disbursement
 EXPENSE REIMBURSEMENT - SEE MEMOS

001

Candidate Name

Category/
Type
 Office Sought: House Disbursement For: 2026
 Senate Primary
 President General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

143.06

Transaction ID : B616447A1DBC94E73A13

Memo Item

Date of Disbursement

M M 10 / D D 03 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

330.33

Transaction ID : B58AB727941C244E29CC

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

252.61

Transaction ID : B9F63864C489C46C9BC1

Memo Item

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

726.00

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 54 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. WHITE, ISAAC, , ,		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	
Mailing Address PO BOX 17182		<input type="text"/> 10 <input type="text"/> 16 <input type="text"/> 2025	
City SOUTHPORT		State IN	Zip Code 46227
Purpose of Disbursement TRAVEL MILEAGE		<input type="text"/> 002	
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:			
Full Name (Last, First, Middle Initial)		Amount of Each Disbursement this Period	
B. UBER		<input type="text"/> 218.82	
Mailing Address 1725 3RD ST		<input type="text"/> Transaction ID : BAA5FB22673C6439FA40	
City SAN FRANCISCO		<input type="checkbox"/> Memo Item	
Purpose of Disbursement TRAVEL		<input type="text"/> C	
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:			
Full Name (Last, First, Middle Initial)		Amount of Each Disbursement this Period	
C. WHITE, ISAAC, , ,		<input type="text"/> 27.25	
Mailing Address PO BOX 17182		<input type="text"/> Transaction ID : B24548328AD8A4D34960	
City SOUTHPORT		<input type="checkbox"/> Memo Item	
Purpose of Disbursement FIELD CONSULTING SERVICES		<input type="text"/> C	
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:			
SUBTOTAL of Disbursements This Page (optional).....		<input type="text"/> 750.00	
TOTAL This Period (last page this line number only).....		<input type="text"/> 750.00	

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

PAGE 55 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORT

State
IN

Zip Code
46227

Purpose of Disbursement
EXPENSE REIMBURSEMENT - SEE MEMOS

001

Candidate Name

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD ST

City
SAN FRANCISCO

State
CA

Zip Code
94158-2203

Purpose of Disbursement
TRAVEL

002

Candidate Name

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORT

State
IN

Zip Code
46227

Purpose of Disbursement
TRAVEL MILEAGE

002

Candidate Name

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

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

268.21

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

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

268.21

Transaction ID : B2E40E5749C9749CE9D8

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

15.55

Transaction ID : B96AE420D84524A37AC4

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

100.66

Transaction ID : B29E5BF699A6D49F3BA0

Memo Item

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

PAGE 56 OF 76

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORT

State
IN

Zip Code
46227

Purpose of Disbursement
EXPENSE REIMBURSEMENT - SEE MEMOS

001

Candidate Name

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORT

State
IN

Zip Code
46227

Purpose of Disbursement
TRAVEL MILEAGE

002

Candidate Name

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD ST

City
SAN FRANCISCO

State
CA

Zip Code
94158-2203

Purpose of Disbursement
TRAVEL

002

Candidate Name

Category/
Type

Office Sought:
 House
 Senate
 President

Disbursement For: 2026
 Primary General
Other (specify) ▼

State: District:

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

208.16

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

Date of Disbursement

12 / 05 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

208.16

Transaction ID : B80CEB0D2A06540398A0

Memo Item

Date of Disbursement

12 / 02 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

159.25

Transaction ID : BB1AA803A759545AAB38

Memo Item

Date of Disbursement

12 / 02 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

48.91

Transaction ID : B79DEE87F315D4B85B68

Memo Item

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 57 OF 76

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

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
FIELD CONSULTING SERVICES

001

Candidate Name

Category/
Type

Office Sought:

House
Senate
President

Disbursement For: 2026

 Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

Office Sought:

House
Senate
President

Disbursement For: 2026

 Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

Office Sought:

House
Senate
President

Disbursement For: 2026

 Primary General
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ► 752.20

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

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : BCE6914415A7242428F5

Memo Item

Date of Disbursement

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

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

0.95

Transaction ID : B691F62608501473ABDE

Memo Item

Date of Disbursement

 M M 10 / D D 14 / Y Y Y Y Y
 10 14 2025

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

1.25

Transaction ID : BE6782552B37D4F8490E

Memo Item

SCHEDULE B (FEC Form 3)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINRED

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M 10 / D 20 / Y 2025

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

2.43

Transaction ID : B252DA61DCD5F4C93B47

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINRED

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M 10 / D 27 / Y 2025

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

2.28

Transaction ID : B1AE4C06B1B034414A38

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINRED

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M 11 / D 03 / Y 2025

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

261.68

Transaction ID : B69DD42B1984B4150A06

Memo Item

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

266.39

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 59 OF 76

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

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)
SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

 Purpose of Disbursement
 CREDIT CARD MERCHANT FEE

001

 Candidate Name
 WINRED

 Category/
 Type

 Office Sought: House Primary Disbursement For: 2026
 Senate General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

60.23

Transaction ID : B37435457DE1146EEA56

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

 Purpose of Disbursement
 CREDIT CARD MERCHANT FEE

001

 Candidate Name
 WINRED

 Category/
 Type

 Office Sought: House Primary Disbursement For: 2026
 Senate General
 President Other (specify) ▼

State: District:

Date of Disbursement

 M M / D D / Y Y Y Y
 11 17 2025

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

0.93

Transaction ID : BC1A08EE10E594A54AED

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

 Purpose of Disbursement
 CREDIT CARD MERCHANT FEE

001

 Candidate Name
 WINRED

 Category/
 Type

 Office Sought: House Primary Disbursement For: 2026
 Senate General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

1.18

Transaction ID : BC8174E6643FC4E6A875

Memo Item

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

62.34

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 60 OF 76

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINRED

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

0.34

Transaction ID : B2977CD7700CE416DBAB

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINRED

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

40.13

Transaction ID : B421C5C2B691D49E7B7D

Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINRED

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

1.75

Transaction ID : B3C0A4BC6687D4CF8BEE

Memo Item

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

42.22

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 Page

FOR LINE NUMBER:
(check only one)

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

PAGE 61 OF 76

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINRED

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 22 / Y Y Y Y Y 2025

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

3.93

Transaction ID : BEEC301A73F6349A8BC4

Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219-1891

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINRED

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

0.30

Transaction ID : BB3C0777A9B964E59A6E

Memo Item

Full Name (Last, First, Middle Initial)

C. ZOOM

Mailing Address 55 S ALMADEN BLVD

City SAN JOSE State CA Zip Code 95113-1608

Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

16.99

Transaction ID : B511C05EC889C4E96A4B

Memo Item

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

21.22

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

78591.19

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

PAGE 62 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : C6A7F6FC589A04443B97

SHREVE FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)			<input type="checkbox"/> Memo Item	Election: 2024
SHREVE, JEFFERSON, , ,				<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 17182				
City SOUTHPORT	State IN	ZIP Code 46227	<input checked="" type="checkbox"/> Personal Funds of the Candidate	
Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00		Balance Outstanding at Close of This Period 100000.00	
TERMS	Date Incurred M M / D D / Y Y Y Y 09 / 16 / 2024	Date Due M M / D D / Y Y Y Y NONE	Interest Rate (If none, enter 0) 0.00	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
List All Endorsers or Guarantors (if any) to Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional).....► 100000.00				
TOTALS This Period (last page in this line only)►				
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				

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

PAGE 63 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : C6FDE22CD942F476C8F9

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2024

 Primary General Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
06D D
05Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

50000.00

TOTALS This Period (last page in this line only)Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 64 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : CC99C6BF6D26247419FF

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2026

 Primary
 General
 Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
09D D
29Y Y Y Y
2025

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

1000000.00

TOTALS This Period (last page in this line only)Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 65 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : CA041F3E6D2D64F809A6

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2024

 Primary
 General
 Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
03D D
31Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

1000000.00

TOTALS This Period (last page in this line only).....►Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 66 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : C90FFB25E53CC4FFE900

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2024

 Primary
 General
 Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

700000.00

0.00

700000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
03D D
28Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

700000.00

TOTALS This Period (last page in this line only)Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 67 OF 76
FOR LINE NUMBER:
(check only one)
 13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C17DEF342EDB74A2FBAA

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2024

 Primary
 General
 Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
02D D
29Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

1000000.00

TOTALS This Period (last page in this line only).....►Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 68 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : CBFF3D1FC2D0D46F6998

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2024

 Primary
 General
 Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

600000.00

0.00

600000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
04D D
26Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

600000.00

TOTALS This Period (last page in this line only)Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 69 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : C32DDF7217B2B428A8E7

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2024

 Primary
 General
 Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
02D D
21Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

1000000.00

TOTALS This Period (last page in this line only).....►Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)**LOANS**Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 70 OF 76
FOR LINE NUMBER:
(check only one)
 13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C9FE6944440CD40C1A2F

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address
PO BOX 17182

Election: 2024

 Primary
 General
 Other (specify) ▼City
SOUTHPORTState
INZIP Code
46227 Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

300000.00

0.00

300000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
03D D
31Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

300000.00

TOTALS This Period (last page in this line only).....►Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 71 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : C2BFDBFB36A9643EDAB8

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2024

 Primary General Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
08D D
07Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

50000.00

TOTALS This Period (last page in this line only)Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 72 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : C755C9D8D3C4940199B2

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2026

 Primary
 General
 Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000000.00

0.00

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
12D D
29Y Y Y Y
2025

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

1000000.00

TOTALS This Period (last page in this line only).....►Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 73 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : CE130FB8252BF49B5AF8

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address
PO BOX 17182

Election: 2024

 Primary
 General
 Other (specify) ▼City
SOUTHPORTState
INZIP Code
46227 Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

500000.00

0.00

500000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 11 / 2024M M / D D / Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

500000.00

TOTALS This Period (last page in this line only)Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 74 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : C4C0B138262214F288FE

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address
PO BOX 17182

Election: 2024

 Primary
 General
 Other (specify) ▼City
SOUTHPORTState
INZIP Code
46227 Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

500000.00

0.00

500000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 / 18 / 2024M M / D D / Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

500000.00

TOTALS This Period (last page in this line only).....►Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 75 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : CEA4F5FB9BCF54383A38

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address
PO BOX 17182

Election: 2024

 Primary General Other (specify) ▼City
SOUTHPORTState
INZIP Code
46227 Personal Funds of the Candidate

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 24 / 2024M M / D D / Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

50000.00

TOTALS This Period (last page in this line only)Carry outstanding balance only to **LINE 3, Schedule D**, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 76 OF 76

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

NAME OF COMMITTEE (In Full)

Transaction ID : C75AE888D13C34C5BBD3

SHREVE FOR CONGRESS

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

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

Election: 2024

 Primary General Other (specify) ▼

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

50000.00

0.00

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
08D D
23Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00

% (apr)

 Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

50000.00

TOTALS This Period (last page in this line only)

7900000.00

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