

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

CHARLIE MCCLINTOCK FOR CONGRESS

ADDRESS (number and street)

PO BOX 131

Check if different
than previously
reported. (ACC)

ALBURNETT

IA

52202

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00918664

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IA

02

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

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

through

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

CRATE, BRADLEY, T, MR,

Signature of Treasurer

CRATE, BRADLEY, T, MR,

Date

M M / D D / Y Y Y Y
01 / 31 / 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
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

CHARLIE MCCLINTOCK FOR CONGRESS

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	806.15	8113.57
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	806.15	8113.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	967.81	1123.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	967.81	1123.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	13989.91	
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)	7000.00	

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

CHARLIE MCCLINTOCK FOR CONGRESS

Report Covering the Period:

From:

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

To:

M M / D D / Y Y Y Y
12 / 31 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

300.00

7152.29

(ii) Unitemized

506.15

961.28

(iii) TOTAL of contributions
from individuals ▶

806.15

8113.57

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

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

806.15

8113.57

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

7000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

7000.00

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

0.00

0.00

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)..... ▶

806.15

15113.57

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.....	967.81	1123.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	967.81	1123.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	14151.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	806.15
25. SUBTOTAL (add Line 23 and Line 24).....	14957.72
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	967.81
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	13989.91

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

PAGE 5 OF 12

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

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

NAME OF COMMITTEE (In Full)

CHARLIE MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

MACHACEK, DAVID, R, ,

A.

Mailing Address 4276 N ALBURNETT RD

City

ALBURNETT

State

IA

Zip Code

52202

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.165118113

Amount of Each Receipt this Period

300.00

☐ Memo Item**B.**Full Name (Last, First, Middle Initial)
WINREDMailing Address 4250 FAIRFAX DR
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

246.06

Date of Receipt

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

Transaction ID : SA11AI.164596063

Amount of Each Receipt this Period

50.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.**C.**Full Name (Last, First, Middle Initial)
WINREDMailing Address 4250 FAIRFAX DR
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

246.06

Date of Receipt

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

Transaction ID : SA11AI.164615587

Amount of Each Receipt this Period

96.06

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

300.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 12

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

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NAME OF COMMITTEE (In Full)

CHARLIE MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)
WINRED

A.

Mailing Address 4250 FAIRFAX DR
STE 600

City
ARLINGTON

State
VA

Zip Code
22203

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

246.06

Date of Receipt

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

Transaction ID : SA11AI.165425557

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

Full Name (Last, First, Middle Initial)
WINRED

B.

Mailing Address 4250 FAIRFAX DR
STE 600

City
ARLINGTON

State
VA

Zip Code
22203

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

246.06

Date of Receipt

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

Transaction ID : SA11AI.166269307

Amount of Each Receipt this Period

50.00

☒ Memo Item

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

0.00

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

300.00

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

PAGE 7 OF 12

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

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NAME OF COMMITTEE (In Full)

CHARLIE MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MCCLINTOCK, CHARLIE, , ,

Mailing Address 227 DONALD DR

City
ALBURNETTState
IAZip Code
52202Purpose of Disbursement
EXPENSE REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

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
1	0		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

630.32

Transaction ID : SB17.1087347

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CRAZY CHEAP POLITICAL SIGNSMailing Address 11525A STONEHOLLOW DR
STE 100City
AUSTINState
TXZip Code
78758Purpose of Disbursement
YARD SIGNS

Candidate Name

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
0	9		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32.94

Transaction ID : SB17.1087347.2

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. DALEY PROFESSIONAL WEB SOLUTIONS

Mailing Address 211 CARDINAL DRIVE

City
MONTGOMERYState
NYZip Code
12549Purpose of Disbursement
WEB SERVICES

Candidate Name

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
0	9		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

164.00

Transaction ID : SB17.1087347.3

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

630.32

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

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

PAGE 8 OF 12

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

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NAME OF COMMITTEE (In Full)

CHARLIE MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		04		2025

City
WASHINGTONState
DCZip Code
20260

FEC Identification Number

CPurpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

79.00

Transaction ID : SB17.1087347.4

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2025

City
WASHINGTONState
DCZip Code
20260

FEC Identification Number

CPurpose of Disbursement
DELIVERY SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

31.40

Transaction ID : SB17.1087347.5

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. VISTAPRINT

Mailing Address 275 WYMAN ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		19		2025

City
WALTHAMState
MAZip Code
02451

FEC Identification Number

CPurpose of Disbursement
PRINTING EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

322.98

Transaction ID : SB17.1087347.6

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

0.00

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

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

PAGE 9 OF 12

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

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NAME OF COMMITTEE (In Full)

CHARLIE MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MCCLINTOCK, CHARLIE, , ,

Mailing Address 227 DONALD DR

City
ALBURNETTState
IAZip Code
52202Purpose of Disbursement
EXPENSE REIMBURSEMENT: SEE ITEMIZATIONS IF REQUIRED

Candidate Name

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
1	1		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

288.00

Transaction ID : SB17.1094194

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANTHEM SCREEN PRINTINGMailing Address 2591 DALLAS PKWY
STE 300City
FRISCOState
TXZip Code
75034Purpose of Disbursement
PRINTING EXPENSE

Candidate Name

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
0	9		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

132.00

Transaction ID : SB17.1094194.1

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 LENFANT PLZ SW

City
WASHINGTONState
DCZip Code
20260Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

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
1	0		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

156.00

Transaction ID : SB17.1094194.3

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**288.00****TOTAL** This Period (last page this line number only).....▶

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

PAGE 10 OF 12

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

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NAME OF COMMITTEE (In Full)

CHARLIE MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
MERCHANT FEES

Candidate Name

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
1	0		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : SB17.1087612

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
MERCHANT FEES

Candidate Name

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
1	0		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.05

Transaction ID : SB17.1088125

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
MERCHANT FEES

Candidate Name

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
1	1		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.05

Transaction ID : SB17.1094931

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

43.50

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

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

PAGE 11 OF 12

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

CHARLIE MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
MERCHANT FEES

Candidate Name

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
11		05		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

3.94

Transaction ID : SB17.1095779

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLC

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
MERCHANT FEES

Candidate Name

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
12		03		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

2.05

Transaction ID : SB17.1101476

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

5.99

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

967.81

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

PAGE 12 OF 12

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4107

CHARLIE MCCLINTOCK FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MCCLINTOCK, CHARLIE, , ,

Mailing Address

PO BOX 131

City

ALBURNETT

State

IA

ZIP Code

52202

☒ Personal Funds of the Candidate

Original Amount of Loan

7000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

7000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 25 / 2025M 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).....▶

7000.00

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

7000.00

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