

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Ralph Norman for Senate					
ADDRESS (number and street) PO Box 2655					
CITY Rock Hill		STATE SC		ZIP CODE 29732	
2. NAME OF CANDIDATE Norman, Ralph, , ,			3. OFFICE SOUGHT (State and District) Senate SC 00		4. FEC IDENTIFICATION NUMBER C00956912
5. IS THIS AN AMENDMENT? ☐ NO, THIS IS A NEW FILING ☒ YES, IT AMENDS THE NOTICE FILED ON 08 / 13 / 2026					
A. FULL NAME ACPAC ACA INTERNATIONAL			Name of Employer Transaction ID : TX20160		Date (month, day, year) 08/11/2026
MAILING ADDRESS 8615 EAGLE CREEK CIR			Occupation		Amount 2500.00
CITY SAVAGE	STATE MN	ZIP CODE 55378-			
B. FULL NAME HOPKINS, LOUIE, , ,			Name of Employer SELF EMPLOYED		Date (month, day, year) 08/11/2026
MAILING ADDRESS 1355 LAZAR PL			Transaction ID : TX20132		Amount 1041.02
CITY FLORENCE	STATE SC	ZIP CODE 29501-5664	Occupation HOME BUILDER- DEVELOPER		
C. FULL NAME IVY, CONWAY, , ,			Name of Employer IVY MINERALS		Date (month, day, year) 08/11/2026
MAILING ADDRESS P.O. BOX 1408			Transaction ID : TX20105		Amount 3500.00
CITY BEAUFORT	STATE SC	ZIP CODE 29901-1408	Occupation OWNER		
D. FULL NAME MEYERS, ALLISON, , ,			Name of Employer RIVET STRATEGIES		Date (month, day, year) 08/11/2026
MAILING ADDRESS 204 37TH AVE N			Transaction ID : TX20142		Amount 1900.00
CITY SAINT PETERSBURG	STATE FL	ZIP CODE 33704-1416	Occupation CONSULTANT		
E. FULL NAME STRANGE, MICHAEL, , ,			Name of Employer STRANGE BROTHERS		Date (month, day, year) 08/11/2026
MAILING ADDRESS 500 HAMMETT ROAD			Transaction ID : TX20108		Amount 1000.00
CITY GREER	STATE SC	ZIP CODE 29650-2822	Occupation PRESIDENT		
SIGNATURE (optional) Diehr, Sara, , ,				DATE 08/13/2026	For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

FEC FORM 6

(Revised 03/2016)

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE TRIPLETT, JAMES, , , 3700 INDIA HOOK RD ROCK HILL SC 29732-9468		Name of Employer UNITED INFRASTRUCTURE GROUP Transaction ID : TX20146 Occupation CEO AND PRESIDENT Date (month, day, year) 08/11/2026 Amount 3643.56	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE TROUTMAN, ROGER, , , 3352 LAKE WYLIE DRIVE ROCK HILL SC 29732-8639		Name of Employer RETIRED Transaction ID : TX20106 Occupation RETIRED Date (month, day, year) 08/11/2026 Amount 1000.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE WALKER, MARSHALL, , , JR. PO BOX 2254 LANCASTER SC 29721-2254		Name of Employer RETIRED Transaction ID : TX20161 Occupation RETIRED Date (month, day, year) 08/11/2026 Amount 1000.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE WALLDORF, CHAD, , , 3112 MARSHALL BLVD SULLIVANS ISLAND SC 29482-9638		Name of Employer HOMEMAKER Transaction ID : TX20136 Occupation HOMEMAKER Date (month, day, year) 08/11/2026 Amount 3500.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE WALLDORF, JENA, , , 3112 MARSHALL BLVD SULLIVANS ISLAND SC 29482-9638		Name of Employer HOMEMAKER Transaction ID : TX20135 Occupation HOMEMAKER Date (month, day, year) 08/11/2026 Amount 3500.00	

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE WEBER, LEEANN, , , 214 WATERFORD LANE GREER SC 29650-3268		Name of Employer STRANGE BROTHERS Transaction ID : TX20107 Occupation EXEC Date (month, day, year) 08/11/2026 Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE FREEDOM FIRST PAC P.O. BOX 97485 RALEIGH NC 27624-7485		Name of Employer Transaction ID : TX20329 Occupation Date (month, day, year) 08/11/2026 Amount 5000.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Occupation Date (month, day, year) Amount	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Occupation Date (month, day, year) Amount	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer Occupation Date (month, day, year) Amount	