

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

Office Use Only

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

12FE4M5

GOPAC Election Fund

ADDRESS (number and street)

1000 WILSON BLVD

STE 2000

ARLINGTON

VA

22209

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00559740

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

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)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
- ☒ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

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

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

Election on

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

in the State of

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

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

Election on

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

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
03 01 2026

through

M M M / D D D / Y Y Y Y Y Y
03 31 2026

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

JOHNSON, MELODIE, , ,

Signature of Treasurer

JOHNSON, MELODIE, , ,

Date

M M M / D D D / Y Y Y Y Y Y
04 19 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 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

GOPAC Election FundReport Covering the Period: From:

M M	D D	Y Y Y Y Y
03	01	2026

 To:

M M	D D	Y Y Y Y Y
03	31	2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		137662.03
(b) Cash on Hand at Beginning of Reporting Period.....	133517.45	
(c) Total Receipts (from Line 19)	773870.02	4283210.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	907387.47	4420872.53
7. Total Disbursements (from Line 31).....	832138.18	4345623.24
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	75249.29	75249.29
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)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

GOPAC Election Fund

Report Covering the Period: From:

M M / D D / Y Y Y Y Y
03 01 2026

To:

M M / D D / Y Y Y Y Y
03 31 2026**I. Receipts****COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

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

0.00

40000.00

(ii) Unitemized

15.00

15.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

15.00

40015.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

20000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

15.00

60015.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

773855.02

4223195.50

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

773870.02

4283210.50

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

773870.02

4283210.50

DETAILED SUMMARY PAGE of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	125.00	69722.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	125.00	69722.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	14000.00
24. Independent Expenditures (use Schedule E)	97470.00	517692.01
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	720543.18	3744208.43
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	832138.18	4345623.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	832138.18	4345623.24

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15.00	60015.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15.00	60015.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	125.00	69722.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	125.00	69722.80

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 16

(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☒ 17
☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOPAC INC

Mailing Address 1000 WILSON BLVD STE 2000

City
ARLINGTONState
VAZip Code
22209FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10157640.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2026

Transaction ID : SA1

Amount of Each Receipt this Period

515000.00

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OPERATION GUARDIAN SUPPORT PAC

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824-0844FEC ID number of contributing
federal political committee.

C C00919035

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

82000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 02 / 2026

Transaction ID : SA17.840073

Amount of Each Receipt this Period

10000.00

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FOSTERING A BETTER MIAMI-DADEMailing Address 2100 SALZEDO ST
SUITE 200City
CORAL GABLESState
FLZip Code
33134-4319FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

248855.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 09 / 2026

Transaction ID : SA11A.840090

Amount of Each Receipt this Period

248855.02

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

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

773855.02

773855.02

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

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

BANK CHARGES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB.31

Amount of Each Disbursement this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ 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	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

125.00

125.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. ALVARADO FOR CONGRESS

Mailing Address 542 CROSS WIND DRIVE

City
GREENWOODState
KYZip Code
46143

Purpose of Disbursement

CONTRIBUTION

Candidate Name

ALVARADO, RALPH, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: KY

District: 06

Date of Disbursement

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

FEC Identification Number

C C00912303**Transaction ID : SB.4**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ERIN HOUCHIN FOR CONGRESS

Mailing Address 3213 DUKE STREET STE 700

City
ALEXANDRIAState
VAZip Code
22314

Purpose of Disbursement

CONTRIBUTION

Candidate Name

HOUCHIN, ERIN, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: IN

District: 09

Date of Disbursement

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

FEC Identification Number

C C00800649**Transaction ID : SB.5**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JESSICA STEINMANN FOR CONGRESS

Mailing Address PO BOX 180542

City
CONROEState
TXZip Code
77305

Purpose of Disbursement

CONTRIBUTION

Candidate Name

STEINMANN, JESSICA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 08

Date of Disbursement

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

FEC Identification Number

C C00919530**Transaction ID : SB.3**

Amount of Each Disbursement this Period

2500.00

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

10000.00

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

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

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. MILLER-MEEKS FOR CONGRESS

Mailing Address 220 W WINDSOR AVENUE

City
ALEXANDRIAState
VAZip Code
22301

Purpose of Disbursement

CONTRIBUTION

Candidate Name

MILLER-MEEKS, MARIANNETTE, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

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

FEC Identification Number

C C00558825

Transaction ID : SB.2

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ECHOLS FOR CONGRESS

Mailing Address 996 MAINE AVE SW

City
WASHINGTONState
DCZip Code
20024

Purpose of Disbursement

CONTRIBUTION

Candidate Name

ECHOLS, MICHAEL, , ,

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: LA

District: 05

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	8		2	0	2	6		

FEC Identification Number

C C00938654

Transaction ID : SB.17

Amount of Each Disbursement this Period

2500.00

☐ 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	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

4000.00

14000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. JOBS FIRST COALITION POLITICAL FUND

Mailing Address PO BOX 2071

City
BROOKFIELDState
WIZip Code
53008Purpose of Disbursement
NON FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.8

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OHIO REPUBLICAN SENATE CAMP. CMTE.

Mailing Address 4679 WINTERSET DRIVE

City
COLUMBUSState
OHZip Code
43220Purpose of Disbursement
NON FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.6

Amount of Each Disbursement this Period

13669.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OHIO REPUBLICAN SENATE CAMP. CMTE.

Mailing Address 4679 WINTERSET DRIVE

City
COLUMBUSState
OHZip Code
43220Purpose of Disbursement
NON FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.7

Amount of Each Disbursement this Period

24923.51

☐ Memo Item

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

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

63592.75

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. BULLHORN COMMUNICATIONS

Mailing Address 550 CONGRESSIONAL BOULEVARD, SUITE

City
CARMELState
INZip Code
46032-5664

Purpose of Disbursement

NON FED DISB - MEDIA

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.9

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BRENNER FOR OHIO

Mailing Address 4465 CACKLER ROAD

City
DELAWAREState
OHZip Code
43015

Purpose of Disbursement

NON FED DISB - CONTRIBUTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.13

Amount of Each Disbursement this Period

16615.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HAGAN FOR STATE REPRESENTATIVE

Mailing Address 11301 MARLBORO AVENUE NE

City
ALLIANCEState
OHZip Code
44601

Purpose of Disbursement

NON FED DISB - CONTRIBUTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.14

Amount of Each Disbursement this Period

16615.67

☐ Memo Item

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

41231.34

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

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. HOAGLAND FOR OHIO

Mailing Address 5751 TW RD 120

City
ADENAState
OHZip Code
43901Purpose of Disbursement
NON FED DISB - CONTRIBUTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.11

Amount of Each Disbursement this Period

16615.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LARRY KIDD FOR OHIO

Mailing Address 9856 ARCHER LANE

City
DUBLINState
OHZip Code
43017Purpose of Disbursement
NON FED DISB - CONTRIBUTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.12

Amount of Each Disbursement this Period

16615.67

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BULLHORN COMMUNICATIONS

Mailing Address 550 CONGRESSIONAL BOULEVARD, SUITE

City
CARMELState
INZip Code
46032-5664Purpose of Disbursement
NON FEB DISB - WEBSITE DESIGN

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB.20

Amount of Each Disbursement this Period

1900.00

☐ Memo Item

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

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

35131.34

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

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

NON FED DISB - BANK CHARGES

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB.19

Amount of Each Disbursement this Period

352.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FLORIDA REPUBLICAN SENATE CAMPAIGN COMMITTEE

Mailing Address 2640-A MITCHAM DRIVE

City
TALLAHASSEEState
FLZip Code
32308

Purpose of Disbursement

NON FED DISB - CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.21

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SIMWINS

Mailing Address 1509 E 9TH AVENUE

City
TAMPAState
FLZip Code
33605

Purpose of Disbursement

NON FED DISB - PRINTING/POSTAGE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.27

Amount of Each Disbursement this Period

30219.70

☐ Memo Item

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

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

80571.90

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

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. INDIANA HOUSE REPUBLICAN CAMPAIGN COMMITTEE

Mailing Address 101 WEST OHIO STREETSUITE 2200

City
INDIANAPOLISState
INZip Code
46204Purpose of Disbursement
NON FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB.30

Amount of Each Disbursement this Period

500000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

500000.00

720527.33

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 15 OF 16
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) GOPAC Election Fund			FEC IDENTIFICATION NUMBER ▼ C C00559740	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee INVICTUS ADVERTISING ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 19 / 2026	
Mailing Address 16192 COASTAL HIGHWAY			Amount 32490.00	
City LEWES	State DE	Zip Code 19958-3608	Transaction ID : SE24.1036 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 19 / 2026	
Purpose of Expenditure DIRECT MAIL		Category/ Type		
Name of Federal Candidate: PRIDEMORE, TRICIA, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: <u>11</u> ☐ President ☐ Senate State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought 97470.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee INVICTUS ADVERTISING ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 25 / 2026	
Mailing Address 16192 COASTAL HIGHWAY			Amount 32490.00	
City LEWES	State DE	Zip Code 19958-3608	Transaction ID : SE24.1037 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 25 / 2026	
Purpose of Expenditure DIRECT MAIL		Category/ Type		
Name of Federal Candidate: PRIDEMORE, TRICIA, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: <u>11</u> ☐ President ☐ Senate State: <u>GA</u>	
Calendar Year-To-Date Per Election for Office Sought 97470.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 64980.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>JOHNSON, MELODIE, , ,</u>			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 16 OF 16
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) GOPAC Election Fund			FEC IDENTIFICATION NUMBER ▼ C C00559740	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on			M M / D D / Y Y Y Y Y Y	
Full Name of Payee INVICTUS ADVERTISING		☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 31 / 2026	
Mailing Address 16192 COASTAL HIGHWAY		City LEWES	State DE	Zip Code 19958-3608
Amount 32490.00				
Purpose of Expenditure DIRECT MAIL		Category/ Type	Transaction ID : SE24.1038 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 25 / 2026	
Name of Federal Candidate: PRIDEMORE, TRICIA, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 11 ☐ President ☐ Senate State: GA	
Calendar Year-To-Date Per Election for Office Sought		97470.00	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee		☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address		City	State	Zip Code
Amount 				
Purpose of Expenditure		Category/ Type	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate:		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			32490.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures			97470.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature JOHNSON, MELODIE, , ,			Date M M / D D / Y Y Y Y Y Y 03 / 20 / 2026	