

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

1 2 F E 4 M 5

MIKE KELLY FOR CONGRESS

ADDRESS (number and street)

PO BOX 476



Check if different than previously reported. (ACC)

LYNDORA

PA

16045-0476

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00474189

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

PA

16

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

01 / 01 / 2025

through

M M / D D / Y Y Y Y

03 / 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 KING, THOMAS, W, , III

Signature of Treasurer

KING, THOMAS, W, , III

Date

M M / D D / Y Y Y Y

04 / 15 / 2025

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

MIKE KELLY FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2025

To:

MM / DD / YYYY
03 / 31 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	126338.08	139139.84
(b) Total Contribution Refunds (from Line 20(d))	0.00	11303.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	126338.08	127836.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	112900.73	207115.27
(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))	112900.73	207115.27
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1054973.73	
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)	90000.00	

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

MIKE KELLY FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2025

To:

MM / DD / YYYY
03 / 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).....

23075.00

29375.00

(ii) Unitemized

438.08

439.84

(iii) TOTAL of contributions
from individuals ▶

23513.08

29814.84

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

102825.00

109325.00

(d) The Candidate

0.00

0.00

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

126338.08

139139.84

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.04

0.04

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

126338.12

139139.88

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.....

112900.73

207115.27

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

6303.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

5000.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0.00

11303.00

21. OTHER DISBURSEMENTS

1151.44

10979.83

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

114052.17

229398.10

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

1042687.78

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

126338.12

25. SUBTOTAL (add Line 23 and Line 24).....

1169025.90

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

114052.17

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

1054973.73

: 97 'A -G7 9 @ @ B9 CI G'H9 LH'F9 @ H98 'HC '5 'F9 DCFH ZG7 <98 I @ 'CF 'H9 A -N5 HCB

Form/Schedule: F3N

Transaction ID :

PLEASE NOTE: THE COMMITTEE HAS DEMONSTRATED THE NECESSARY STEPS TO ESTABLISH BEST EFFORTS TO OBTAIN AND DISCLOSE THE FULL IDENTIFICATION OF ALL INDIVIDUALS WHO CONTRIBUTE IN EXCESS OF \$200 IN A CALENDAR YEAR. THESE EFFORTS INCLUDE A CLEAR REQUEST WITH THE ORIGINAL SOLICITATION, FOLLOWED BY A REQUEST FOR MISSING INFORMATION LETTER WITHIN 30 DAYS, WHICH CLEARLY ASKS FOR THE MISSING INFORMATION WITHOUT SOLICITING A CONTRIBUTION. IN ADDITION, THE LETTER READS: FEDERAL LAW REQUIRES US TO MAKE OUR BEST EFFORTS TO COLLECT AND REPORT THE NAME, MAILING ADDRESS, OCCUPATION AND NAME OF EMPLOYER OF ALL INDIVIDUALS WHO CONTRIBUTE IN EXCESS OF \$200 IN A CALENDAR YEAR. WE THEN ENCLOSE A SELF-ADDRESSED ENVELOPE AND INCLUDE A TELEPHONE NUMBER TO REACH THE COMMITTEE WITH ANY QUESTIONS. A SECOND REQUEST FOR MISSING INFORMATION LETTER IS SENT IF WE DO NOT RECEIVE THE INFORMATION IN A TIMELY MANNER. IN THE EVENT THAT WE RECEIVE ADDITIONAL INFORMATION FROM CONTRIBUTORS WHOSE INFORMATION WAS NOT ORIGINALLY DISCLOSED, WE WILL AMEND THE APPROPRIATE REPORT TO REFLECT THE ADDITIONAL DISCLOSURES PROPERLY.

Form/Schedule:

Transaction ID:

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

PAGE 6 OF 74

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

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

NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

BEVIL, KRISTIN, LIDDLE, ,

A. Mailing Address 715 S ELIZABETH STCity
DENVERState
COZip Code
80209-4712FEC ID number of contributing
federal political committee.

C

Name of Employer
PINSLEY RAILROAD COMPANYOccupation
GENERAL COUNSEL & CHIEF LEGAL OFFIC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 04 2025

Transaction ID : A5F380881B046483C81F

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCMANUS, JOHN, , ,

B. Mailing Address 2082 GRACE MANOR CTCity
MC LEANState
VAZip Code
22101FEC ID number of contributing
federal political committee.

C

Name of Employer
THE MCMANUS GROUPOccupation
PRESIDENT, FOUNDER OF POLITICAL CON

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AA71CB98A291743CEA46

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KIM, THOMAS, , ,

C. Mailing Address 7009 ARBOR LANECity
MCLEANState
VAZip Code
22101FEC ID number of contributing
federal political committee.

C

Name of Employer
THOMAS CAPITOL PARTNERS, INC.Occupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : AEC890F8673FB4616B9A

Amount of Each Receipt this Period

500.00

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

3350.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

HAWK, DALE, , ,

A.

Mailing Address 147 WATER OAK DRIVE

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 21 2025

Transaction ID : A703355F743F24D5DA7A

Amount of Each Receipt this Period

675.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TEED, ELIZABETH, , ,

B.

Mailing Address 1301 S JOYCE ST

City

ARLINGTON

State

VA

Zip Code

22202-2079

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE GOVERNMENT AFFAIRS

Occupation

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 24 2025

Transaction ID : ADEEC6C1C01154F13B9A

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAYNE, WARREN, , ,

C.

Mailing Address 4120 SEMINARY RD

City

ALEXANDRIA

State

VA

Zip Code

22304

FEC ID number of contributing
federal political committee.

C

Name of Employer

MAYER BROWN

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 22 2025

Transaction ID : AA7DBDDA49CF844D5A29

Amount of Each Receipt this Period

1000.00

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

1925.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

WEBB, RICHARD, , ,

A.

Mailing Address 315 WEST 3RD

City

PITTSBURG

State

KS

Zip Code

66762

FEC ID number of contributing
federal political committee.

C

Name of Employer
WATCO COMPANIESOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3050.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 21 2025

Transaction ID : A1F15A140F40649F98A7

Amount of Each Receipt this Period

3050.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ARNOLD, BRANDON, , ,

B.

Mailing Address 9043 DUNLOGGIN COURT

City

ELLICOTT CITY

State

MD

Zip Code

21042

FEC ID number of contributing
federal political committee.

C

Name of Employer
NATIONAL TAXPAYERS UNIONOccupation
NONPROFIT EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A7E4F2980D5784DFFB12

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BETKE, RICHARD, , ,

C.

Mailing Address 32 SQUADRON LINE RD

City

SIMSBURY

State

CT

Zip Code

06070-1616

FEC ID number of contributing
federal political committee.

C

Name of Employer
FARMRAIL SYSTEM INC.Occupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 28 2025

Transaction ID : A99FED0068305478081A

Amount of Each Receipt this Period

250.00

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

3800.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

MANDELBLATT, ERIC, , ,

A. Mailing Address 534 E COOPER AVECity
ASPENState
COZip Code
81611-1834FEC ID number of contributing
federal political committee.

C

Name of Employer
SOROBAN CAPITAL PARTNERS LPOccupation
MANAGING PARTNER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 07 2025

Transaction ID : A677E436FCEF34CA6882

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HANCOCK, HAROLD, , ,

B. Mailing Address 1210 HUNTLY PLCity
ALEXANDRIAState
VAZip Code
22307FEC ID number of contributing
federal political committee.

C

Name of Employer
BROWNSTEINOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 24 2025

Transaction ID : AC76E138A2C3346E7B8C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DERDERIAN, JAMES, , ,

C. Mailing Address 182 PRINCE GEORGE STREETCity
ANNAPOLISState
MDZip Code
21401FEC ID number of contributing
federal political committee.

C

Name of Employer
THE STANTON PARK GROUPOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AC6BF245C17E546BF8C1

Amount of Each Receipt this Period

250.00

☐ Memo Item

4000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

POSNER, HENRY, , ,

A.

Mailing Address 4383 SCHENLEY FARMS TERRACE

City

PITTSBURGH

State

PA

Zip Code

15213

FEC ID number of contributing
federal political committee.

C

Name of Employer

IOWA INTERSTATE RR

Occupation

RAILROADER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 21 / 2025D D / Y Y Y Y Y
21 / 2025Y Y Y Y Y
2025

Transaction ID : A09CE6717BBDD49D5A90

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRANASIAK, DAVID, E, ,

B.

Mailing Address 873 COACHWAY

City

ANNAPOLIS

State

MD

Zip Code

21401

FEC ID number of contributing
federal political committee.

C

Name of Employer

WILLIAMS & JENSEN PLLC

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 15 / 2025D D / Y Y Y Y Y
15 / 2025Y Y Y Y Y
2025

Transaction ID : A4ADDA2E158734DA38AE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LUMADUE, JUSTIN, R, ,

C.

Mailing Address 508 12TH ST NE

City

WASHINGTON

State

DC

Zip Code

20002-6310

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOCKORNY GROUP

Occupation

PRINCIPAL

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 06 / 2025D D / Y Y Y Y Y
06 / 2025Y Y Y Y Y
2025

Transaction ID : A3010C10E48D84B2296F

Amount of Each Receipt this Period

500.00

☐ Memo Item

1800.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

CLARK, STEPHEN, B., ,

A.

Mailing Address 9273 LERWICK DR

City
DUBLINState
OHZip Code
43017-9492FEC ID number of contributing
federal political committee.

C

Name of Employer
CLARK LYTLE & GEDULDIGOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 14 / 2025

Transaction ID : A3D5B6E31DFB24CECB3D

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RUDISILL, ZACHARY, , ,

B.

Mailing Address 2702 24TH ST N

City
ARLINGTONState
VAZip Code
22207FEC ID number of contributing
federal political committee.

C

Name of Employer
AKIN GUMPOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A1FF83591C51347278BA

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RHOADS, BARRY, , ,

C.

Mailing Address 6793 FATHER JOHN CT

City
MCLEANState
VAZip Code
22101FEC ID number of contributing
federal political committee.

C

Name of Employer
CASSIDY & ASSOCIATESOccupation
GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 24 / 2025

Transaction ID : AE34ADBC2BFC64F74920

Amount of Each Receipt this Period

250.00

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

1000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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PAGE 12 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

MANDELBLATT, ERIC, , ,

A.

Mailing Address 534 E COOPER AVE

City

ASPEN

State

CO

Zip Code

81611-1834

FEC ID number of contributing
federal political committee.

C

Name of Employer

SOROBAN CAPITAL PARTNERS LP

Occupation

MANAGING PARTNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		07		2025

Transaction ID : A746AB0AE4269429196E

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DERDERIAN, JAMES, , ,

B.

Mailing Address 182 PRINCE GEORGE STREET

City

ANNAPOLIS

State

MD

Zip Code

21401

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE STANTON PARK GROUP

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A6A993882E73744CFA20

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PARE, JOHN, , , JR.

C.

Mailing Address 1746 WEBSTER STREET

City

BALTIMORE

State

MD

Zip Code

21230-4747

FEC ID number of contributing
federal political committee.

C

Name of Employer

NATIONAL FEDERATION OF THE BLINDEXC
EXECUTIVE DIRECTOR FOR ADVOCACY AN

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		06		2025

Transaction ID : AB1CD5B13678245AD8F9

Amount of Each Receipt this Period

500.00

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

4250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

BABCOCK, BOB, , ,

A. Mailing Address 5769 SWEETENERS BLVDCity
LAKEVILLEState
NYZip Code
14480FEC ID number of contributing
federal political committee.

C

Name of Employer
LAL RAILROADOccupation
PRESIDENT/CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 04 2025

Transaction ID : AE22D18BBB31A4D458FE

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MICHELSON, G, MARK, ,

B. Mailing Address 2901 S 5TH AVECity
SIOUX FALLSState
SDZip Code
57105-5009FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 21 2025

Transaction ID : AADB245A01E394290A30

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RUDISILL, ZACHARY, , ,

C. Mailing Address 2702 24TH ST NCity
ARLINGTONState
VAZip Code
22207FEC ID number of contributing
federal political committee.

C

Name of Employer
AKIN GUMPOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A55BCFF14C92F43DFB0F

Amount of Each Receipt this Period

250.00

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

1250.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

KESSLER, RICHARD, , ,

A.

Mailing Address 816 POLO PL

City

GREAT FALLS

State

VA

Zip Code

22066

FEC ID number of contributing
federal political committee.

C

Name of Employer

KESSLER & ASSOCIATES

Occupation

GOVERNMENT RELATIONS

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 06 / 2025D D / Y Y Y Y Y
06 / 2025Y Y Y Y Y
2025

Transaction ID : AD53FF0C4FAEA43F9877

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RESNIK, BENNETT, , ,

B.

Mailing Address 1320 MICHIGAN AVE

City

ALEXANDRIA

State

VA

Zip Code

22314-1216

FEC ID number of contributing
federal political committee.

C

Name of Employer

VENN STRATEGIES

Occupation

CONSULTANT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 21 / 2025D D / Y Y Y Y Y
21 / 2025Y Y Y Y Y
2025

Transaction ID : A327EF8CF4FD24E6E86F

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HEAD, MARTHA, , ,

C.

Mailing Address 1616 WEST 22ND STREET

City

MINNEAPOLIS

State

MN

Zip Code

55405

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

BUSINESS

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 21 / 2025D D / Y Y Y Y Y
21 / 2025Y Y Y Y Y
2025

Transaction ID : ADDE526CF4FAA4BF7B7A

Amount of Each Receipt this Period

400.00

☐ Memo Item

1400.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

WYATT, TIM, , ,

A. Mailing Address 2542 VANDETTA RDCity
HANSONState
KYZip Code
42413-9753FEC ID number of contributing
federal political committee.

C

Name of Employer
PADUCAH & LOUISVILLE RAILWAY, INC.Occupation
SVP & COO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 30 2025

Transaction ID : AB1C5E1C1C21042079BE

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶300.00
23075.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL TELECOMMUNICATIONS COOPERATIVE ASSOCIATION RURAL BROADBAND PAC

A.

Mailing Address 4121 WILSON BLVD

FL 10

City

ARLINGTON

State

VA

Zip Code

22203-4415

FEC ID number of contributing
federal political committee.**C** C00004473

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A05427EA132A74D3FA82

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BLUEPAC-BLUE CROSS & BLUE SHIELD ASSOC PAC

B.

Mailing Address 1310 G ST NW 12TH FL.

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C** C00194746

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID : AD1B2B9C81BE54DF3A19

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COVINGTON & BURLINGTON PAC

C.

Mailing Address 850 TENTH STREET, NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.**C** C00462630

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AE4C295FB3A5D410795A

Amount of Each Receipt this Period

1000.00

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

3250.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICATION (A...

A.

Mailing Address 4301 WILSON BLVD

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		06		2025

Transaction ID : A850417920F4241DEA69

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

THRIVENT FINANCIAL FOR LUTHERANS PAC

Mailing Address PO BOX 1892

City
APPLETONState
WIZip Code
54912-1892FEC ID number of contributing
federal political committee.**C** C00121319

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		20		2025

Transaction ID : A9236D4F63D39496EAD2

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

AMERICAN SUPPLY ASSOCIATION PAC

Mailing Address 1200 N ARLINGTON HEIGHTS RD
STE 150City
ITASCAState
ILZip Code
60143-3178FEC ID number of contributing
federal political committee.**C** C00166074

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		14		2025

Transaction ID : A70E24AF4994C410DBCE

Amount of Each Receipt this Period

1000.00

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

7000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF FAMILY PHYSICIANS PAC**A.**Mailing Address 1133 CONNECTICUT AVE NW
STE 1100

City

WASHINGTON

State

DC

Zip Code

20036-4342

FEC ID number of contributing
federal political committee.**C** C00411553

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		27		2025

Transaction ID : A62BDE0F7B3484887AFB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

D.R.I.V.E PAC**B.**

Mailing Address 25 LOUISIANA AVE NW

City

WASHINGTON

State

DC

Zip Code

20001-2130

FEC ID number of contributing
federal political committee.**C** C00032979

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		17		2025

Transaction ID : A325E224C58204232A0B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELI LILLY AND COMPANY PAC**C.**

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

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		27		2025

Transaction ID : A834160DABA584C05AC3

Amount of Each Receipt this Period

5000.00

☐ Memo Item

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT**A.**

Mailing Address 702 SW 8TH ST

City

BENTONVILLE

State

AR

Zip Code

72716-6209

FEC ID number of contributing
federal political committee.**C** C00093054

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		27		2025

Transaction ID : A1FED098DF6154DD3B0D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

IRON MOUNTAIN EMPLOYEES PAC**B.**

Mailing Address 1 FEDERAL ST

City

BOSTON

State

MA

Zip Code

02110-2012

FEC ID number of contributing
federal political committee.**C** C00523936

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		27		2025

Transaction ID : A6C7283934D7048698A8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GENESEE & WYOMING INC. PAC**C.**Mailing Address 13901 SUTTON PARK DR S
STE 270C

City

JACKSONVILLE

State

FL

Zip Code

32224-0228

FEC ID number of contributing
federal political committee.**C** C00289058

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6025.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		21		2025

Transaction ID : AB4B48F4AF26846FA816

Amount of Each Receipt this Period

5000.00

☐ Memo Item

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN CHEMISTRY COUNCIL PAC

A.

Mailing Address 700 2ND ST NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C C00252338

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : AE3C044A82D734D87AD6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

US CHAMBER PAC

Mailing Address 1615 H STREET NW

City

WASHINGTON

State

DC

Zip Code

20062

FEC ID number of contributing
federal political committee.

C C00082040

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 20 2025

Transaction ID : AD0639B1D6C184B79B51

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

AMERICAN OCCUPATIONAL THERAPY ASSOC., INC. PAC

Mailing Address 6116 EXECUTIVE BLVD
STE 200

City

NORTH BETHESDA

State

MD

Zip Code

20852-4925

FEC ID number of contributing
federal political committee.

C C00089086

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 20 2025

Transaction ID : A664528235A1E45A887C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

4500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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			15

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ASLRRRA-PAC

A.Mailing Address 50 F ST NW
STE 7020City
WASHINGTONState
DCZip Code
20001-1507FEC ID number of contributing
federal political committee.**C** C00298190

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6050.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		21		2025

Transaction ID : A52A1FDB74BBE46819F5

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ENERGY INFRASTRUCTURE COUNCIL PAC

B.Mailing Address 300 NEW JERSEY AVE NW
FL 9City
WASHINGTONState
DCZip Code
20001-2030FEC ID number of contributing
federal political committee.**C** C00567081

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		14		2025

Transaction ID : A437C81615D3542AAAC2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

UPSPAC

C.

Mailing Address 55 GLENLAKE PKWY

City
ATLANTAState
GAZip Code
30328-3474FEC ID number of contributing
federal political committee.**C** C00064766

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		27		2025

Transaction ID : A6F6EE877DB0B4C93A76

Amount of Each Receipt this Period

2500.00

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

8500.00

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

BUCHANAN INGERSOLL ROONEY COMM. FOR EFFECTIVE GOV'TMailing Address 501 GRANT STREET
SUITE 200City
PITTSBURGHState
PAZip Code
15219FEC ID number of contributing
federal political committee.**C** C00195388

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : AA84881C07AFE45D89C0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INVESTMENT COMPANY INSTITUTE PACMailing Address 1401 H ST NW
1200City
WASHINGTONState
DCZip Code
20005-2110FEC ID number of contributing
federal political committee.**C** C00105981

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		14		2025

Transaction ID : A65BC3DA6015E4CB7B63

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CENTENE CORPORATION PAC (CENTENE PAC)

Mailing Address CENTENE PLAZA 7700 FORSYTH BLVD

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		27		2025

Transaction ID : A3790B1342101409FA66

Amount of Each Receipt this Period

2500.00

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

4500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

OPTIONS CLEARING CORPORATION PAC**A.**Mailing Address 125 S FRANKLIN ST
STE 1200City
CHICAGOState
ILZip Code
60606-4601FEC ID number of contributing
federal political committee.**C** C00255877

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AF38D99D02CE54902B07

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SAMMONS ENTERPRISES INC. PAC**B.**Mailing Address 5949 SHERRY LN
STE 1900City
DALLASState
TXZip Code
75225-8015FEC ID number of contributing
federal political committee.**C** C00388777

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	5

Transaction ID : A55BF7031F1BD4341862

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PCG (PERFORMANCE CONTACTING GROUP) EMPLOYEE OWNERS PAC**C.**

Mailing Address 11145 THOMPSON AVE

City
LENEXAState
KSZip Code
66219-2302FEC ID number of contributing
federal political committee.**C** C00659060

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	5

Transaction ID : A23FD77A3E0C3437894B

Amount of Each Receipt this Period

3000.00

☐ Memo Item

6000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL PROPANE GAS ASSOCIATION PAC**A.**

Mailing Address 1899 L STREET NW, SUITE 350

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.**C** C00079681

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : AD8E184A360A64559AAF

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TENASKA INC EMPLOYEES PAC**B.**

Mailing Address 14302 FNB PKWY

City

OMAHA

State

NE

Zip Code

68154-5212

FEC ID number of contributing
federal political committee.**C** C00479998

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		27		2025

Transaction ID : AA8B0BE81FCA6444EADA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ASLRRA-PAC**C.**Mailing Address 50 F ST NW
STE 7020

City

WASHINGTON

State

DC

Zip Code

20001-1507

FEC ID number of contributing
federal political committee.**C** C00298190

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6050.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		21		2025

Transaction ID : AAA4375551B5A4A5C93F

Amount of Each Receipt this Period

1050.00

☐ Memo Item

7050.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN OPTOMETRIC ASSOCIATION PAC**A.**Mailing Address 1505 PRINCE ST
SUITE 300

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.**C** C00024968

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2025

Transaction ID : A4745453E90764B9CA3E

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HEALTHCARE DISTRIBUTION ALLIANCE PAC (HDA PAC)**B.**

Mailing Address 901 N GLEBE RD

City

ARLINGTON

State

VA

Zip Code

22203-1853

FEC ID number of contributing
federal political committee.**C** C00247569

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 14 / 2025

Transaction ID : AFB41D3470E3E4D62BAB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CVS HEALTH PAC**C.**

Mailing Address 1275 PENNSYLVANIA AVENUE, NW, SUIT

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.**C** C00384818

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2025

Transaction ID : AABDB2161EDD54C8FA65

Amount of Each Receipt this Period

2500.00

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

5500.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

EXXONMOBIL PAC

A.

Mailing Address 5959 LAS COLINAS BLVD

City
IRVINGState
TXZip Code
75039FEC ID number of contributing
federal political committee.**C** C00121368

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : ACB5A765FCBFA4F22AF7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GENESEE & WYOMING INC. PAC

B.Mailing Address 13901 SUTTON PARK DR S
STE 270CCity
JACKSONVILLEState
FLZip Code
32224-0228FEC ID number of contributing
federal political committee.**C** C00289058

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6025.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		21		2025

Transaction ID : AC6F08E1C363F44E8B75

Amount of Each Receipt this Period

1025.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CERRIS INC. PAC (FORMERLY KNOW AS MMC CORP PAC)

C.

Mailing Address 7801 W 110TH ST

City
OVERLAND PARKState
KSZip Code
66210-2305FEC ID number of contributing
federal political committee.**C** C00509356

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : AC4C4F6D32E8B4B1E87C

Amount of Each Receipt this Period

2000.00

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

4025.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

HUMANA INC PAC

A.

Mailing Address 500 W MAIN ST

City
LOUISVILLEState
KYZip Code
40202-2946FEC ID number of contributing
federal political committee.**C** C00271007

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 20 2025

Transaction ID : A5799FFFAE0840A1B7C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AICPA PAC

B.

Mailing Address 220 LEIGH FARM RD

PALLADIAN CORPORATE CENTER I

City
DURHAMState
NCZip Code
27707-8110FEC ID number of contributing
federal political committee.**C** C00077321

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 06 2025

Transaction ID : A4584C0ABAE9F402D992

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MESSER CONSTRUCTION CO PAC

C.

Mailing Address 643 W COURT ST

City
CINCINNATIState
OHZip Code
45203-1511FEC ID number of contributing
federal political committee.**C** C00435990

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 27 2025

Transaction ID : A54A31A9F63784E30981

Amount of Each Receipt this Period

2000.00

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

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

CLEANCAPITAL HOLDINGS LLC PAC

A.

Mailing Address 228 PARK AVE S

City
NEW YORKState
NYZip Code
10003-1502FEC ID number of contributing
federal political committee.

C C00874297

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 14 2025

Transaction ID : A03404FD699C749F7A0C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION OF NURSE PRACTITIONERS PAC

Mailing Address PO BOX 12846

City
AUSTINState
TXZip Code
78711-2846FEC ID number of contributing
federal political committee.

C C00358903

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A9E0CF1459126474B8A2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

WAWA, INC. PAC

Mailing Address C/O WIPFLI, LLP
1717 ARCH STREET, SUITE 750City
PHILADELPHIAState
PAZip Code
19103-2713FEC ID number of contributing
federal political committee.

C C00148510

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 27 2025

Transaction ID : A24D8004B4C3A4ADFB15

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

CORNING INCORPORATED EMPLOYEES PAC (COREPAC)Mailing Address 1001 PENNSYLVANIA AVE NW
STE 420City
WASHINGTONState
DCZip Code
20004-2542FEC ID number of contributing
federal political committee.**C** C00033589

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		27		2025

Transaction ID : A3379587E457040DC86D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ENERGY MARKETERS OF AMERICA SMALL BUSINESS PACMailing Address 1901 N FORT MYER DR
SUITE 500City
ARLINGTONState
PAZip Code
22209FEC ID number of contributing
federal political committee.**C** C00035204

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		31		2025

Transaction ID : A146B86DE1F724075B4D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN HOTEL AND LODGING ASSOCIATION PAC ('HOTELPAC')Mailing Address 1250 I ST NW
STE 1100City
WASHINGTONState
DCZip Code
20005-5904FEC ID number of contributing
federal political committee.**C** C00001198

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		21		2025

Transaction ID : A49A68B93A849430696F

Amount of Each Receipt this Period

5000.00

☐ Memo Item

7000.00

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

SCHEDULE A (FEC Form 3)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALTERMAN MANAGEMENT GROUP PAC**A.**

Mailing Address 14703 JONES MALTSBERGER RD

City

SAN ANTONIO

State

TX

Zip Code

78247-3713

FEC ID number of contributing
federal political committee.**C** C00652883

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2025

Transaction ID : A703693A13A724410A55

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SENIORS HOUSING PAC**B.**

Mailing Address 5225 WISCONSIN AVE NW, SUITE 502

City

WASHINGTON

State

DC

Zip Code

20016

FEC ID number of contributing
federal political committee.**C** C00325332

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025

Transaction ID : A1A02E566AD6F4D7C8D9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL FUEL GAS COMPANY FEDERAL PAC**C.**

Mailing Address 6363 MAIN ST

City

WILLIAMSVILLE

State

NY

Zip Code

14221-5855

FEC ID number of contributing
federal political committee.**C** C00083758

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 06 / 2025

Transaction ID : AB8D7ABCB968547958AF

Amount of Each Receipt this Period

5000.00

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

8000.00

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

SCHEDULE A (FEC Form 3)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF CHAIN DRUG STORES, INC. PAC**A.**Mailing Address 1776 WILSON BLVD
STE 200City
ARLINGTONState
VAZip Code
22209-2516FEC ID number of contributing
federal political committee.**C** C00022368

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		27		2025

Transaction ID : AB648984A60824A6A867

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PFIZER PAC**B.**

Mailing Address 66 HUDSON BLVD E

City
NEW YORKState
NYZip Code
10001-2189FEC ID number of contributing
federal political committee.**C** C00016683

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : ADEBF321703C349D7B16

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN BUS ASSOC PAC BUSPAC**C.**Mailing Address 111 K STREET NE
9TH FLOORCity
WASHINGTONState
DCZip Code
20002FEC ID number of contributing
federal political committee.**C** C00004879

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		14		2025

Transaction ID : AA8E451C92C054CB8B59

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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

PAGE 32 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

WESTINGHOUSE AIR BRAKE TECHNOLOGIES CORPORATION PAC**A.**

Mailing Address 30 ISABELLA ST

City

PITTSBURGH

State

PA

Zip Code

15212-5862

FEC ID number of contributing
federal political committee.**C** C00841338

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AE874D647900E45FDAE0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BURNS & MCDONNELL INC PAC**B.**

Mailing Address 9400 WARD PARKWAY

City

KANSAS CITY

State

MO

Zip Code

64114

FEC ID number of contributing
federal political committee.**C** C00442913

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	5	

Transaction ID : AC84B4585FC36442BA4F

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ZIMMER BIOMET HOLDINGS, INC. PAC (ZIMMER BIOMET PAC)**C.**Mailing Address 1455 PENNSYLVANIA AVE NW
STE 1125

City

WASHINGTON

State

DC

Zip Code

20004-1052

FEC ID number of contributing
federal political committee.**C** C00399386

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	5	

Transaction ID : A3D57E27EF2CD4BE7B9A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

7000.00

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

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

PAGE 33 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMGEN PAC

A. Mailing Address 1 AMGEN CENTER DRCity
THOUSAND OAKSState
CAZip Code
91320FEC ID number of contributing
federal political committee.**C** C00251876

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		27		2025

Transaction ID : A7CD5954F7026440EADE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

1000.00

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

102825.00

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

PAGE 34 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2025

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

CPurpose of Disbursement
PAYROLL TAXES

001

Amount of Each Disbursement this Period

3.68

Transaction ID : BC1E5A98881124D86ABB

☐ Memo Item

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)

B. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2025

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

CPurpose of Disbursement
PAYROLL FEES

001

Amount of Each Disbursement this Period

190.80

Transaction ID : B08D42DEA6F3849EA91B

☐ Memo Item

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)

C. SHOCKEY MINI STORAGE

Mailing Address 140 SHOCKEY LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2025

City
BUTLERState
PAZip Code
16001

FEC Identification Number

CPurpose of Disbursement
STORAGE UNIT EXPENSE

001

Amount of Each Disbursement this Period

74.20

Transaction ID : BE86E9A3CE6D34DC58D3

☐ Memo Item

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).....▶

268.68

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 35 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOORDASHMailing Address 901 MARKET ST
SUITE 600City
SAN FRANCISCOState
CAZip Code
94103-1740Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : B88F755565FD54D80A4B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DUNN SIRIANNI, CAREY, , ,

Mailing Address PO BOX 186

City
SEWICKLEYState
PAZip Code
16143Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

375.00

Transaction ID : B023DB3FD48F04643AAC

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GUSTO

Mailing Address 525 20TH S

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
CREDIT - PAYROLL TAXES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

- 150.19

Transaction ID : BC408C72CF4604EF1B7C

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

234.80

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 36 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B17DD69ACA48C49A8B4A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOORDASHMailing Address 901 MARKET ST
SUITE 600City
SAN FRANCISCOState
CAZip Code
94103-1740Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

245.38

Transaction ID : B55D7473D425546D4B58

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TERRA DAVIS CONSULTINGMailing Address 700 PENNSYLVANIA AVE. SE
SUITE 2023City
WASHINGTONState
DCZip Code
20003-2493Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

14443.69

Transaction ID : B21BC980DAD8B4B0F839

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

16189.07

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 37 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMAZON.COM

Mailing Address SOUTH LAKE UNION

City
SEATTLEState
WAZip Code
98101Purpose of Disbursement
GENERAL OFFICE SUPPLIES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

48.74

Transaction ID : BE9289E4B0EDA4FBBB1D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GUSTO

Mailing Address 525 20TH S

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
CREDIT PAYROLL FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.19

Transaction ID : B705F0C3419DC43C0A0C

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GUSTO

Mailing Address 525 20TH S

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1874.46

Transaction ID : B546F16180954497B934

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

2073.39

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 38 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. VERIZON WIRELESS

Mailing Address 540 BUTLER CROSSING, SUITE 5

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2025

City
BUTLERState
PAZip Code
16001Purpose of Disbursement
CELLULAR SERVICE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

272.79

Transaction ID : BF02C818DDA954028816

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE BUTLER EAGLE

Mailing Address PO BOX 271

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2025

City
BUTLERState
PAZip Code
16003Purpose of Disbursement
ADVERTISING

004

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:

FEC Identification Number

C

Amount of Each Disbursement this Period

2100.00

Transaction ID : B2DDC943F86BB400D8F4

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2025

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

185.71

Transaction ID : B90650FFEE6784AD5B5B

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

2558.50

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 39 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BUTLER COUNTY COUNTRY CLUB

Mailing Address 310 COUNTRY CLUB ROAD

City
BUTLERState
PAZip Code
16002-7618Purpose of Disbursement
VENUE RENTAL

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7220.46

Transaction ID : B827262C045C443CCBD6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : B492EDD0C87BA4478A0C

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOORDASHMailing Address 901 MARKET ST
SUITE 600City
SAN FRANCISCOState
CAZip Code
94103-1740Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

68.44

Transaction ID : B360D7376C0034358AAF

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

7293.90

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 40 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. 5 GUYS

Mailing Address 1400 I ST NW

City
WASHINGTONState
DCZip Code
20005-2208Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

165.09

Transaction ID : B06A8F83D31AB45D1BEE

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHIPOTLEMailing Address 610 NEWPORT CENTER DRIVE
SUITE 1300City
NEWPORT BEACHState
CAZip Code
92660Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

211.33

Transaction ID : B12A8BBD114C6462C9E1

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ARISTOTLE INTERNATIONAL, INC.

Mailing Address PO BOX 716045

City
PHILADELPHIAState
PAZip Code
19171Purpose of Disbursement
SOFTWARE SERVICE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2385.00

Transaction ID : BAE7AEE9F11C4463EA1C

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

2761.42

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
PAYROLL TAXES

001

Amount of Each Disbursement this Period

1898.44

Transaction ID : B357D52FCD9AF421F929

☐ Memo Item

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)

B. CFS COMPLIANCE

Mailing Address PO BOX 30844

Date of Disbursement

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

City
BETHESDAState
MDZip Code
20824

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Amount of Each Disbursement this Period

1.75

Transaction ID : BF6D038B4A0A2401EBEE

☐ Memo Item

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)

C. CFS COMPLIANCE

Mailing Address PO BOX 30844

Date of Disbursement

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

City
BETHESDAState
MDZip Code
20824

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Amount of Each Disbursement this Period

1.50

Transaction ID : B2A53811D51DC420FAB9

☐ Memo Item

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).....▶

1901.69

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

CPurpose of Disbursement
PAYROLL FEE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

220.80

Transaction ID : B15FAD1AD26F446FF99F

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. DOORDASHMailing Address 901 MARKET ST
SUITE 600

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94103-1740

FEC Identification Number

CPurpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

9.99

Transaction ID : BA8F4FC9FBCDD4B4284A

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. SHOCKEY MINI STORAGE

Mailing Address 140 SHOCKEY LANE

Date of Disbursement

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

City
BUTLERState
PAZip Code
16001

FEC Identification Number

CPurpose of Disbursement
STORAGE UNIT EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

74.20

Transaction ID : B110CAB8C1A5A4E72888

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

304.99

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2033.82

Transaction ID : BE9A62BB5FFB9436DB88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.25

Transaction ID : BA6671CA7C89D48EA9A4

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EASTERN ALLIANCE INSURANCE GROUP

Mailing Address PO BOX 206

City
EAST PETERSBURGState
PAZip Code
17520Purpose of Disbursement
INSURANCE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

686.00

Transaction ID : BDB5E8D003A00432DB34

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

2724.07

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : BBB932B3DC5614FD4BF5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
E-MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

280.30

Transaction ID : B8BFFF77D2EB543D794A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : BC1ABD461C7B04A49B77

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

1815.30

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U-HAUL MOVING & STORAGE

Mailing Address 26 K STREET NE

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20002

FEC Identification Number

C

Purpose of Disbursement
STORAGE

001

Amount of Each Disbursement this Period

121.85

Transaction ID : BA0C37134FF5348E4990

☐ Memo Item

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)

B. DOORDASHMailing Address 901 MARKET ST
SUITE 600

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94103-1740

FEC Identification Number

C

Purpose of Disbursement
MEAL EXPENSE

001

Amount of Each Disbursement this Period

56.55

Transaction ID : BBDAF281A73B44577BFB

☐ Memo Item

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)

C. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
PAYROLL TAXES

001

Amount of Each Disbursement this Period

1895.46

Transaction ID : BDDB3274AB5294CA7B3E

☐ Memo Item

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).....▶

2073.86

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PITNEY BOWES

Mailing Address 3001 SUMMER ST

City
STAMFORDState
CTZip Code
06905-4317Purpose of Disbursement
SHIPPING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.30

Transaction ID : B4312C99ACAE34A07ACF

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

459.38

Transaction ID : BB87D186A5E1D426982A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BUTLER COUNTRY CLUB

Mailing Address PO BOX 348

City
BUTLERState
PAZip Code
16003Purpose of Disbursement
CATERING

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2126.36

Transaction ID : B414F59A37C8648F29E8

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

2596.04

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TERRA DAVIS CONSULTINGMailing Address 700 PENNSYLVANIA AVE. SE
SUITE 2023City
WASHINGTONState
DCZip Code
20003-2493Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10770.00

Transaction ID : BEB1D2807E2154F2DB97

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PITNEY BOWES

Mailing Address 3001 SUMMER ST

City
STAMFORDState
CTZip Code
06905-4317Purpose of Disbursement
SHIPPING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.30

Transaction ID : BB232446F1A564905A11

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.50

Transaction ID : B024A43AA367E43DC812

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

10782.80

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
E-MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.90

Transaction ID : B468105178BD04DFCBB3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VERIZON WIRELESS

Mailing Address 540 BUTLER CROSSING, SUITE 5

City
BUTLERState
PAZip Code
16001Purpose of Disbursement
CELLULAR SERVICE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

134.87

Transaction ID : B98C930C063604760B84

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
E-MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : B3E4628FDD28841FC90A

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

186.07

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
E-MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.34

Transaction ID : BBA19205159F34728898

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.01

Transaction ID : B8721C4FDB1724AC08E4

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.75

Transaction ID : BDFF0F18EFA6D4F38A22

☐ Memo Item

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

4.10

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH S

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1883.44

Transaction ID : B092967FDD97646358DA

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BULLFEATHERS

Mailing Address 410 FIRST STREET NE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

278.20

Transaction ID : B90FBD2D02D0F4E0CA14

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PNC BANK

Mailing Address 37 MAIN STREET

City
HUDSONState
OHZip Code
44236Purpose of Disbursement
BANKING SERVICE CHARGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

55.00

Transaction ID : BCF4C01B6B31D45CEA2B

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

2216.64

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
PAYROLL FEE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

Amount of Each Disbursement this Period

190.80

Transaction ID : BD2957A9D14414DDD978

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B. SHOCKEY MINI STORAGE

Mailing Address 140 SHOCKEY LANE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

City
BUTLERState
PAZip Code
16001

FEC Identification Number

C

Purpose of Disbursement
STORAGE UNIT EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

Amount of Each Disbursement this Period

74.20

Transaction ID : B91559F1E380F41A4B52

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C. DOORDASHMailing Address 901 MARKET ST
SUITE 600

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94103-1740

FEC Identification Number

C

Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

Amount of Each Disbursement this Period

9.99

Transaction ID : BBE64E3B8BCEA4AA0A0B

☐ Memo Item

State:

District:

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

274.99

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

722.48

Transaction ID : B487DDB48FB914E2CA51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
E-MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : BA68F696EDEB246EE8D9

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHIPOTLEMailing Address 610 NEWPORT CENTER DRIVE
SUITE 1300City
NEWPORT BEACHState
CAZip Code
92660Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

228.05

Transaction ID : B97B17445177B4C42990

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

970.83

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 53 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CFS COMPLIANCE

Mailing Address PO BOX 30844

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2025

City
BETHESDAState
MDZip Code
20824

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2.50

Transaction ID : B7AF32A1A68D24851A4E

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. CFS COMPLIANCE

Mailing Address PO BOX 30844

Date of Disbursement

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

City
BETHESDAState
MDZip Code
20824

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : B577C4006C77345F18AD

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. CFS COMPLIANCE

Mailing Address PO BOX 30844

Date of Disbursement

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

City
BETHESDAState
MDZip Code
20824

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2.50

Transaction ID : B4C769857783F4534A1E

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1505.00

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TERRA DAVIS CONSULTINGMailing Address 700 PENNSYLVANIA AVE. SE
SUITE 2023City
WASHINGTONState
DCZip Code
20003-2493Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

8782.31

Transaction ID : B549AE72940DF45C4B08

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
E-MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : B67240FFBB173451E9E6

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address 2711 ELM ST

City
ERIEState
PAZip Code
16504-2935Purpose of Disbursement
GENERAL OFFICE SUPPLIES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

252.51

Transaction ID : BB3C5A8C35C1A43E385B

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

9055.12

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UHAUL MOVING STORAGE

Mailing Address 520 S 29TH ST

City
HARRISBURGState
PAZip Code
17104-2157Purpose of Disbursement
STORAGE UNIT EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

121.85

Transaction ID : B509767D7F898460C855

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
E-MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : BA15BBF5D3F224CA7B1C

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.50

Transaction ID : BF09DCE5CDB45495981B

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

144.65

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 56 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
E-MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

120.90

Transaction ID : B73CBEB5659E84994A4B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GUSTO

Mailing Address 525 20TH S

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1617.88

Transaction ID : BD890DAAA80C2418AB87

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : BA464C18DA72046028A9

☐ Memo Item

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

1753.78

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 57 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

593.28

Transaction ID : B82FE1408280D41949F3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOORDASHMailing Address 901 MARKET ST
SUITE 600City
SAN FRANCISCOState
CAZip Code
94103-1740Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

224.07

Transaction ID : BB494B28CD64F495981F

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHERATON ERIE BAYFRONT HOTEL

Mailing Address 55 WEST BAY ROAD

City
ERIEState
PAZip Code
16507Purpose of Disbursement
FACILITY RENTAL

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B68F305FDE0E149B293E

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

2317.35

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 58 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

409.86

Transaction ID : B137454D422C0496797D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED REPUBLICANS OF BUTLER COUNTY

Mailing Address 1803 N MAIN ST EXT

City
BUTLERState
PAZip Code
16001-1483Purpose of Disbursement
RENT

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B33F0A657C2B34BF19CD

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ARISTOTLE INTERNATIONAL, INC.

Mailing Address PO BOX 716045

City
PHILADELPHIAState
PAZip Code
19171Purpose of Disbursement
SOFTWARE SERVICE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2385.00

Transaction ID : BDBE0007A8439449C9EB

☐ Memo Item

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

2944.86

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 59 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 1340 POYDRAS STREET
SUITE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
E-MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : B34E4E43ABDFF493DA91

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : B132C2A6BB9C84073AE9

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GUSTO

Mailing Address 525 20TH S

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
PAYROLL TAXES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1611.86

Transaction ID : B98D8678F0DE24B4FB22

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

1657.16

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 60 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 5800 GRAND AVE

Date of Disbursement

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

City
PITTSBURGHState
PAZip Code
15225-1201

FEC Identification Number

C

Purpose of Disbursement
FUEL

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

49.34

Transaction ID : BBA56FF05FB134C58A06

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 5800 GRAND AVE

Date of Disbursement

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

City
PITTSBURGHState
PAZip Code
15225-1201

FEC Identification Number

C

Purpose of Disbursement
MEAL EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2.69

Transaction ID : B8969896083F946A98E3

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. STARN MARKETING - SMG

Mailing Address 1057 FRENCH STREET

Date of Disbursement

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

City
MEADVILLEState
PAZip Code
16335

FEC Identification Number

C

Purpose of Disbursement
WEBSITE HOSTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

340.00

Transaction ID : B3DB7CE73C26F466C964

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

392.03

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)

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2025

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
PAYROLL SEE MEMO ITEMS

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4638.18

Transaction ID : B868F130F1C3749AF844

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. KNOEDLER, MATTHEW, , ,

Mailing Address 9340 CLOCKTOWER PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2025

City
FAIRFAXState
VAZip Code
22031-1226

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

832.39

Transaction ID : B061089DA91214B1AA5D

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. BURKE, JILL, , ,

Mailing Address 125 USONIA AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2025

City
ERIEState
PAZip Code
16509-1553

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

608.10

Transaction ID : B9BDDAC978DDC4670B89

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

4638.18

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 62 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BREWER, MELANIE, A, ,

Mailing Address 3921 SASSAFRAS ST

City
ERIEState
PAZip Code
16508Purpose of Disbursement
PAYROLL

001

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	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1971.77

Transaction ID : B9933CDCCC82D4299B95

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FULLER, PATRICK, , ,

Mailing Address 804 WYOMING AVE

City
ERIEState
PAZip Code
16505-3832Purpose of Disbursement
PAYROLL

001

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	3		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1225.92

Transaction ID : BD5D02BEA0C37495D9C2

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. H2 CAPITAL CONSULTING

Mailing Address 325 7TH STREET NW, SUITE 400

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2022

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BBD7559E9E3764DFAA62

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

2500.00

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 63 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
SEE MEMO ITEMS

001

Amount of Each Disbursement this Period

4638.17

Transaction ID : B5A0B8A5ADF0F43D4984

☐ Memo Item

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)

B. BREWER, MELANIE, A, ,

Mailing Address 3921 SASSAFRAS ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

City
ERIEState
PAZip Code
16508

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Amount of Each Disbursement this Period

1971.77

Transaction ID : B0256010659D54E518A6

☒ Memo Item

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)

C. KNOEDLER, MATTHEW, , ,

Mailing Address 9340 CLOCKTOWER PL

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

City
FAIRFAXState
VAZip Code
22031-1226

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Amount of Each Disbursement this Period

832.39

Transaction ID : B953BDD2DD1BE4262A8F

☒ Memo Item

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).....▶

4638.17

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 64 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DAWSON, KEVIN, , ,

Mailing Address 427 SHEPHERD ST NW

City
WASHINGTONState
DCZip Code
20011-5943Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

608.09

Transaction ID : B25647EC9A29D40D7837

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FULLER, PATRICK, , ,

Mailing Address 804 WYOMING AVE

City
ERIEState
PAZip Code
16505-3832Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1225.92

Transaction ID : B34A3AE3D390B4207823

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. GUSTO

Mailing Address 525 20TH S

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
SEE MEMO ITEMS

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4638.17

Transaction ID : B8FDEE8C646E64F2F941

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

4638.17

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 65 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DAWSON, KEVIN, , ,

Mailing Address 427 SHEPHERD ST NW

City
WASHINGTONState
DCZip Code
20011-5943Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

608.09

Transaction ID : BF58ED02796E94CFBB83

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BREWER, MELANIE, A, ,

Mailing Address 3921 SASSAFRAS ST

City
ERIEState
PAZip Code
16508Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1971.77

Transaction ID : B805CA31AA66D4FECAF6

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. KNOEDLER, MATTHEW, , ,

Mailing Address 9340 CLOCKTOWER PL

City
FAIRFAXState
VAZip Code
22031-1226Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

832.39

Transaction ID : B4A97926A4D3E42E09EC

☒ Memo Item**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 66 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FULLER, PATRICK, , ,

Mailing Address 804 WYOMING AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2025

City
ERIEState
PAZip Code
16505-3832

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1225.92

Transaction ID : B5696FB31716341769D7

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2025

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
SEE MEMO ITEMS

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4638.17

Transaction ID : BB29A9C4F865C4F12823

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. BREWER, MELANIE, A, ,

Mailing Address 3921 SASSAFRAS ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2025

City
ERIEState
PAZip Code
16508

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1971.77

Transaction ID : BD70D52778BA841A88C5

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

4638.17

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 67 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KNOEDLER, MATTHEW, , ,

Mailing Address 9340 CLOCKTOWER PL

City
FAIRFAXState
VAZip Code
22031-1226Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

832.39

Transaction ID : BB4BC6635EC8F465988F

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FULLER, PATRICK, , ,

Mailing Address 804 WYOMING AVE

City
ERIEState
PAZip Code
16505-3832Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1225.92

Transaction ID : B0A8866CF8A524A57AD4

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. DAWSON, KEVIN, , ,

Mailing Address 427 SHEPHERD ST NW

City
WASHINGTONState
DCZip Code
20011-5943Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

608.09

Transaction ID : BDF4184F7086749FE9BF

☒ Memo Item**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 68 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2025

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
SEE MEMO ITEMS

001

Amount of Each Disbursement this Period

4638.18

Transaction ID : BF05C24C63A494506BC8

☐ Memo Item

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)

B. KNOEDLER, MATTHEW, , ,

Mailing Address 9340 CLOCKTOWER PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2025

City
FAIRFAXState
VAZip Code
22031-1226

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Amount of Each Disbursement this Period

832.39

Transaction ID : B700026147B334AE8A05

☒ Memo Item

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)

C. FULLER, PATRICK, , ,

Mailing Address 804 WYOMING AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2025

City
ERIEState
PAZip Code
16505-3832

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Amount of Each Disbursement this Period

1225.92

Transaction ID : B0EE8188247C64C6A9A9

☒ Memo Item

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).....▶

4638.18

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 69 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DAWSON, KEVIN, , ,

Mailing Address 427 SHEPHERD ST NW

City
WASHINGTONState
DCZip Code
20011-5943Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

608.10

Transaction ID : BAB7467D0FE5646F8821

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BREWER, MELANIE, A, ,

Mailing Address 3921 SASSAFRAS ST

City
ERIEState
PAZip Code
16508Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1971.77

Transaction ID : B625ED990D4D547F6A34

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. H2 CAPITAL CONSULTING

Mailing Address 325 7TH STREET NW, SUITE 400

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2022

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BBDFC0C9EBA934694A6B

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

2500.00

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 70 OF 74

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GUSTO

Mailing Address 525 20TH S

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
SEE MEMO ITEMS

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4638.18

Transaction ID : B85C321C1D38840ECB74

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. BREWER, MELANIE, A, ,

Mailing Address 3921 SASSAFRAS ST

Date of Disbursement

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

City
ERIEState
PAZip Code
16508

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1971.77

Transaction ID : BD13DE0B608144B30B48

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. FULLER, PATRICK, , ,

Mailing Address 804 WYOMING AVE

Date of Disbursement

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

City
ERIEState
PAZip Code
16505-3832

FEC Identification Number

C

Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1225.92

Transaction ID : BFD92CB63D61A4160B35

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

4638.18

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 71 OF 74

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

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)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KNOEDLER, MATTHEW, , ,

Mailing Address 9340 CLOCKTOWER PL

City
FAIRFAXState
VAZip Code
22031-1226Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

832.39

Transaction ID : B43715CFACC38448FBEA

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BURKE, JILL, , ,

Mailing Address 125 USONIA AVE

City
ERIEState
PAZip Code
16509-1553Purpose of Disbursement
PAYROLL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

608.10

Transaction ID : B38326EAE7355498FB32

☒ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

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).....▶

0.00

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

109830.14

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PRO-LIFE OF MERCER COUNTY

Mailing Address PO BOX 885

Date of Disbursement

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

City
SHARONState
PAZip Code
16146

FEC Identification Number

C

Purpose of Disbursement
LOCAL POLITICAL CONTRIBUTION

011

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

140.00

Transaction ID : B06AAC9A2E8A6440F937

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. COMMUNITY CUP CHARITY

Mailing Address 4281 NORMANDY RUE

Date of Disbursement

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

City
ERIEState
PAZip Code
16506-3652

FEC Identification Number

C

Purpose of Disbursement
CHARITABLE DONATION

012

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

561.44

Transaction ID : B8D5C04C6812944DCA7C

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. MERCER COUNTY REPUBLICAN COMMITTEE

Mailing Address 309 HILLCREST CIR

Date of Disbursement

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

City
GROVE CITYState
PAZip Code
16127-1705

FEC Identification Number

C

Purpose of Disbursement
LOCAL POLITICAL CONTRIBUTION

011

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

350.00

Transaction ID : B399E8A016582466A988

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

1051.44

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

1051.44

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

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

NAME OF COMMITTEE (In Full)

Transaction ID : CDB9ED6986AAF4519861

MIKE KELLY FOR CONGRESS

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

Election: 2010

☐ Primary☒ General☐ Other (specify) ▼

KELLY, GEORGE, J, , JR

Mailing Address

239 W PEARL ST

City

BUTLER

State

PA

ZIP Code

16001

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

10000.00

Balance Outstanding at Close of This Period

90000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 07 / 2010M M / D D / Y Y Y Y
12 31 / 2050

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).....▶

90000.00

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

90000.00

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

H2 CAPITAL CONSULTING

Nature of Debt (Purpose):

FUNDRAISING CONSULTING - ESTIMATED DEBT

Mailing Address 325 7TH STREET NW, SUITE 400

City

WASHINGTON

State

DC

Zip Code

20004

Outstanding Balance Beginning This Period

2500.00

Transaction ID : D96E1819ED5064D2FBEA

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

H2 CAPITAL CONSULTING

Nature of Debt (Purpose):

FUNDRAISING CONSULTING - ESTIMATED DEBT

Mailing Address 325 7TH STREET NW, SUITE 400

City

WASHINGTON

State

DC

Zip Code

20004

Outstanding Balance Beginning This Period

2500.00

Transaction ID : D21E9D52B606E46C3A15

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

0.00

2) **TOTALS** This Period (last page this line number only)

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)