

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

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

1. NAME OF COMMITTEE IN FULL BARRY MOORE FOR U.S. SENATE				
ADDRESS (number and street) P.O. BOX 310815				
CITY ENTERPRISE		STATE AL		ZIP CODE 36331
2. NAME OF CANDIDATE MOORE, FELIX, , ,			3. OFFICE SOUGHT (State and District) Senate AL 01	
4. FEC IDENTIFICATION NUMBER C00720375				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____				
A. FULL NAME ALMODOVAR, ANGEL, , ,			Name of Employer LOCAL DIGITAL ADVERTISING INC.	
MAILING ADDRESS 1 BELLAVISTA RD			Transaction ID : F6.48375	
CITY HUNTSVILLE	STATE AL	ZIP CODE 35811	Occupation FOUNDER/CEO	
B. FULL NAME ALUKIC, BERNAD, , ,			Name of Employer	
MAILING ADDRESS 7851 CRARY STATION RD			Transaction ID : F6.48376	
CITY SEMMES	STATE AL	ZIP CODE 38575	Occupation	
C. FULL NAME ALUKIC, TARA, , ,			Name of Employer	
MAILING ADDRESS 7851 CRARY STATION RD			Transaction ID : F6.48378	
CITY SEMMES	STATE AL	ZIP CODE 38575	Occupation	
D. FULL NAME BRELAND HOMES LLC			Name of Employer	
MAILING ADDRESS 2101 W CLINTON AVE			Transaction ID : F6.48379	
CITY HUNTSVILLE	STATE AL	ZIP CODE 35805	Occupation	
E. FULL NAME BRELAND HOMES LLC			Name of Employer	
MAILING ADDRESS 2101 W CLINTON AVE			Transaction ID : F6.48380	
CITY HUNTSVILLE	STATE AL	ZIP CODE 35805	Occupation	
SIGNATURE (optional) LAPRADE, GARLAND, WAYNE 'SHAG', ,			DATE 05/06/2026	
For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov				

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Revised 03/2016)

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			
BRELAND HOMES LLC		Name of Employer	
2101 W CLINTON AVE		Date (month, day, year)	
HUNTSVILLE AL 35805		05/05/2026	
		Amount	
		3500.00	
		Transaction ID : F6.48381	
		Occupation	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			
LONG BROTHERS LLC		Name of Employer	
PO BOX 2746		Date (month, day, year)	
MOBILE AL 36652		05/05/2026	
		Amount	
		3500.00	
		Transaction ID : F6.48382	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			
LONG BROTHERS LLC		Name of Employer	
PO BOX 2746		Date (month, day, year)	
MOBILE AL 36652		05/05/2026	
		Amount	
		3500.00	
		Transaction ID : F6.48383	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE			
LONG BROTHERS LLC		Name of Employer	
PO BOX 2746		Date (month, day, year)	
MOBILE AL 36652		05/05/2026	
		Amount	
		3500.00	
		Transaction ID : F6.48384	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			
MANDEL, JESSICA, , ,		Name of Employer	
1526 17TH ST		MILLER STRATEGIES	
WASHINGTON DC 20036		Date (month, day, year)	
		05/05/2026	
		Amount	
		1000.00	
		Transaction ID : F6.48385	
		Occupation	
		LOBBYING	

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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE MCINTYRE, NATALIE, , , 555 MASSACHUSETTS AVE WASHINGTON DC 20001		Name of Employer MILLER STRATEGIES Transaction ID : F6.48386 Occupation CONSULTING	
		Date (month, day, year) 05/05/2026	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE MCNAIR, BILL, , , PO BOX 48 POINT CLEAR AL 36564		Name of Employer RETIRED Transaction ID : F6.48387 Occupation RETIRED	
		Date (month, day, year) 05/05/2026	
		Amount 3500.00	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE WISENER, JASON, , , 2405 US 31 HARTSELLE AL 35640		Name of Employer PRO FAB MACHINE Transaction ID : F6.48388 Occupation PRESIDENT	
		Date (month, day, year) 05/05/2026	
		Amount 3500.00	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE WISENER, JASON, , , 2405 US 31 HARTSELLE AL 35640		Name of Employer PRO FAB MACHINE Transaction ID : F6.48389 Occupation PRESIDENT	
		Date (month, day, year) 05/05/2026	
		Amount 3500.00	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	