

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

Office Use Only

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

12FE4M5

WYDEN FOR OREGON

ADDRESS (number and street)

PO BOX 3271

Check if different  
than previously  
reported. (ACC)

PORTLAND

OR

97208

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00436998

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

04

D D D /

01

Y Y Y Y Y Y Y

2026

through

M M M /

06

D D D /

30

Y Y Y Y Y Y Y

2026

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michels, Stephen, , ,

Signature of Treasurer

Michels, Stephen, , ,

Date

M M M /

07

D D D /

13

Y Y Y Y Y Y Y

2026

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**WYDEN FOR OREGON**Report Covering the Period: From: 

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 04  |   | 01  |   | 2026      |

 To: 

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 06  |   | 30  |   | 2026      |

|                                                                                                                  | COLUMN A<br>This Period                    | COLUMN B<br>Calendar Year-to-Date          |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <div><div>Y Y Y Y Y</div><div>2026</div></div>                                 |                                            | <div><div></div><div>30656.53</div></div>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <div><div></div><div>31063.91</div></div>  |                                            |
| (c) Total Receipts (from Line 19) .....                                                                          | <div><div></div><div>113530.00</div></div> | <div><div></div><div>175560.00</div></div> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <div><div></div><div>144593.91</div></div> | <div><div></div><div>206216.53</div></div> |
| 7. Total Disbursements (from Line 31) .....                                                                      | <div><div></div><div>113565.60</div></div> | <div><div></div><div>175188.22</div></div> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <div><div></div><div>31028.31</div></div>  | <div><div></div><div>31028.31</div></div>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <div><div></div><div>0.00</div></div>      |                                            |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <div><div></div><div>0.00</div></div>      |                                            |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**WYDEN FOR OREGON**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 1 |   | 2 | 0 | 2 | 6 |

To:

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

| I. Receipts                                                                                           | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|-------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:                                                            |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees                                               |                               |                                   |
| (i) Itemized (use Schedule A).....                                                                    | 67500.00                      | 90500.00                          |
| (ii) Unitemized .....                                                                                 | 30.00                         | 60.00                             |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶                                                       | 67530.00                      | 90560.00                          |
| (b) Political Party Committees .....                                                                  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                                    | 46000.00                      | 85000.00                          |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 113530.00                     | 175560.00                         |
| 12. Transfers From Affiliated/Other Party Committees.....                                             | 0.00                          | 0.00                              |
| 13. All Loans Received .....                                                                          | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....                                                                     | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....                                           | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds                                                        |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....                                                      | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....                                                              | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..                                                           | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....                         | 113530.00                     | 175560.00                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                   | 113530.00                     | 175560.00                         |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....                                                                    | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....                                                 | 8065.60                       | 21688.22                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 8065.60                       | 21688.22                          |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 102000.00                     | 150000.00                         |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....                                            | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....                                                                  | 0.00                          | 0.00                              |
| 27. Loans Made.....                                                                            | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:                                                               |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 3500.00                       | 3500.00                           |
| (b) Political Party Committees .....                                                           | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....                                             | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 3500.00                       | 3500.00                           |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))                                          |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....                                                                        | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 113565.60                     | 175188.22                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 113565.60                     | 175188.22                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                             | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|---------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....         | 113530.00                             | 175560.00                                 |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                             | 3500.00                               | 3500.00                                   |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....     | 110030.00                             | 172060.00                                 |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) .....▶ | 8065.60                               | 21688.22                                  |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                  | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....▶              | 8065.60                               | 21688.22                                  |

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 34  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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)

**WYDEN FOR OREGON**

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

**A. Bronfman, Jeremy, , ,**

Mailing Address 2407 La Mesa Drive

City  
Santa Monica

State  
CA

Zip Code  
90402

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Lincoln Avenue Communities

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
06 / 10 / 2026

Transaction ID : SA11AI.7197

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

C C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

71500.00

Date of Receipt

MM / DD / YYYY  
06 / 10 / 2026

Transaction ID : SA11AI.7197.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Foster, Jeffrey, , ,**

Mailing Address 133 26 Ave. N

City  
St. Petersburg

State  
FL

Zip Code  
33704

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Georgetown University

Occupation (for Individual)  
Adjunct Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
05 / 08 / 2026

Transaction ID : SA11AI.7130

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 34

(check only one)

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

## **A. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

34000.00

Date of Receipt

**05** / **08** / **2026**

**Transaction ID : SA11AI.7130.0**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

## **B. Garcia, George, Laws, ,**

Mailing Address 5727 5th Road S

City  
Arlington

State  
VA

Zip Code  
22204

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Mirsonia Group, LLC

Occupation (for Individual)  
Consultant & Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**06** / **18** / **2026**

**Transaction ID : SA11AI.7173**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

## **C. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

82500.00

Date of Receipt

**06** / **18** / **2026**

**Transaction ID : SA11AI.7173.0**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 34

(check only one)

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

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NAME OF COMMITTEE (In Full)

WYDEN FOR OREGON

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

A. Harrington, Gerry, , ,

Mailing Address 39 Pike Street  
Suite 2City  
ProvidenceState  
RIZip Code  
02903FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Capitol City GroupOccupation (for Individual)  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 10 / 2026

Transaction ID : SA11AI.7200

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

B. ACT BLUE

Mailing Address 1217 HOE AVE.

City  
BRONXState  
NYZip Code  
11237FEC ID number of contributing  
federal political committee.

C

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 10 / 2026

Transaction ID : SA11AI.7200.0

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

C. Harrington, Stephen, , ,

Mailing Address 8212 St. Martins Lane

City  
PhiladelphiaState  
PAZip Code  
19118FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPH Investments Inc.Occupation (for Individual)  
Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2026

Transaction ID : SA11AI.7193

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

4500.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 34  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

## **A. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

C

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

81500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 16 / 2026

Transaction ID : SA11AI.7193.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

## **B. Haywood, Jessica, , ,**

Mailing Address 1901 Edenbridge Way

City

Nashville

State

TN

Zip Code

37215

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Moonlight Properties

Occupation (for Individual)

COO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11AI.7151

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

## **C. ACT BLUE**

Mailing Address 1217 HOE AVE.

City

BRONX

State

NY

Zip Code

11237

FEC ID number of contributing  
federal political committee.

C

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

59000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 21 / 2026

Transaction ID : SA11AI.7151.0

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Total earmarked through Conduit; PAC limit not affected

**SUBTOTAL** of Receipts This Page (optional)..... ►

5000.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 34  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/>                | <input type="checkbox"/>     | <input type="checkbox"/>     | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Heredia, Geoff, , ,**

Mailing Address 2195 Hollyhock Court

City  
Gilroy

State  
CA

Zip Code  
95020

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cisco

Occupation (for Individual)  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
05 / 14 / 2026

Transaction ID : SA11AI.7137

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

C C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44000.00

Date of Receipt

MM / DD / YYYY  
05 / 14 / 2026

Transaction ID : SA11AI.7137.0

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Jaffe, Morris, , , Jr.**

Mailing Address PO Box 4829

City  
Horshee Bay

State  
TX

Zip Code  
78657

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

MM / DD / YYYY  
06 / 16 / 2026

Transaction ID : SA11AI.7170

Amount of Each Receipt this Period

3500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

8500.00

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

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

FOR LINE NUMBER: PAGE 11 OF 34  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Jones, David, , ,**

Mailing Address 700 13th Street NW

City  
Wshington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Capitol Counsel

Occupation (for Individual)  
Founding Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**06 / 18 / 2026**

**Transaction ID : SA11AI.7180**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

83000.00

Date of Receipt

**06 / 18 / 2026**

**Transaction ID : SA11AI.7180.0**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked though conduit; PAC limit not affected

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

**C. Levin, Deborah, , ,**

Mailing Address 113 Valley Road NW

City  
Atlanta

State  
GA

Zip Code  
30305

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05 / 11 / 2026**

**Transaction ID : SA11AI.7134**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

5500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 34  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

## **A. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

39000.00

Date of Receipt

**05** / **11** / **2026**

**Transaction ID : SA11AI.7134.0**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

## **B. McMillen, C. Thomas, , ,**

Mailing Address 1103 South Carolina Avenue SE

City  
Washington

State  
DC

Zip Code  
20003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Moran Global Strategies

Occupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

**06** / **16** / **2026**

**Transaction ID : SA11AI.7185**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

## **C. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

76000.00

Date of Receipt

**06** / **16** / **2026**

**Transaction ID : SA11AI.7185.0**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1000.00

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

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

FOR LINE NUMBER: PAGE 13 OF 34  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Orlady, David, , ,**

Mailing Address 6800 E Pico Del Monte

City  
Tucson

State  
AZ

Zip Code  
85750

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**05 / 18 / 2026**

**Transaction ID : SA11AI.7141**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

46500.00

Date of Receipt

**05 / 18 / 2026**

**Transaction ID : SA11AI.7141.0**

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Petkanics, Donna, , ,**

Mailing Address 75 North Gordon Way

City  
Los Altos

State  
CA

Zip Code  
94022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05 / 20 / 2026**

**Transaction ID : SA11AI.7149**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

7500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 34  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
|                                         |                              |                              | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

### A. ACT BLUE

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

C

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

54000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 20 / 2026

Transaction ID : SA11AI.7149.0

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Total earmarked through Conduit; PAC limit not affected

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

### B. Quinn, Thomas, , ,

Mailing Address 1217 28th Street NW

City  
Washington

State  
DC

Zip Code  
20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Venable LLP

Occupation (for Individual)  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 17 / 2026

Transaction ID : SA11AI.7182

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

### C. ACT BLUE

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

C

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

82000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
06 / 17 / 2026

Transaction ID : SA11AI.7182.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

500.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 34  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/>                | <input type="checkbox"/>     | <input type="checkbox"/>     | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Roberti, Vincent, , ,**

Mailing Address 900 G Street NW  
Suite 301

City  
Washington

State  
DC

Zip Code  
20001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Roberti Global

Occupation (for Individual)  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06 / 30 / 2026**

**Transaction ID : SA11AI.7217**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. Rogers, Florence, , ,**

Mailing Address 1585 Highway 54

City  
Moreland

State  
GA

Zip Code  
30259

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**05 / 23 / 2026**

**Transaction ID : SA11AI.7163**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**C. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

**C** C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

69000.00

Date of Receipt

**05 / 23 / 2026**

**Transaction ID : SA11AI.7163.0**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

10000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 34  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. Stack, Christopher, , ,**

Mailing Address 198 Mansfield Avenue

City  
Darien

State  
CT

Zip Code  
06820

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY  
 06 / 09 / 2026

Transaction ID : SA11AI.7202

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

C C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70500.00

Date of Receipt

MM / DD / YYYY  
 06 / 09 / 2026

Transaction ID : SA11AI.7202.0

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Thurmond, Phyllis, , ,**

Mailing Address 3449 Lionsgate Court

City  
Lithonia

State  
GA

Zip Code  
30038

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

MM / DD / YYYY  
 05 / 21 / 2026

Transaction ID : SA11AI.7153

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

6500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 34  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17             |                              |                              |                             |

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)

**WYDEN FOR OREGON**

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

### A. ACT BLUE

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

C

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

64000.00

Date of Receipt

05 / 21 / 2026

Transaction ID : SA11AI.7153.0

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Total earmarked through Conduit; PAC limit not affected

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

### B. Tocco, Jessica, , ,

Mailing Address 5 Foster Road

City

East Falmouth

State

MA

Zip Code

01949

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

06 / 16 / 2026

Transaction ID : SA11AI.7190

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Contribution earmarked through ActBlue

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

### C. ACT BLUE

Mailing Address 1217 HOE AVE.

City

BRONX

State

NY

Zip Code

11237

FEC ID number of contributing  
federal political committee.

C

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

80500.00

Date of Receipt

06 / 16 / 2026

Transaction ID : SA11AI.7190.0

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 34  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

**WYDEN FOR OREGON**

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

**A. Vitale, Christopher, , ,**

Mailing Address 34 Tobin Lane

City  
Bristol

State  
RI

Zip Code  
02809

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Capitol City Group

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY  
 06 / 16 / 2026

Transaction ID : SA11AI.7187

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

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

**B. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

C C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

77000.00

Date of Receipt

MM / DD / YYYY  
 06 / 16 / 2026

Transaction ID : SA11AI.7187.0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

**C. Vulich, Sally, , ,**

Mailing Address 6800 E Pico Del Monte

City  
Tucson

State  
AZ

Zip Code  
85750

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Not Employed

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY  
 05 / 18 / 2026

Transaction ID : SA11AI.7144

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

3500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 34  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 |
| <input type="checkbox"/>                | <input type="checkbox"/>     | <input type="checkbox"/>     | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

### A. ACT BLUE

Mailing Address 1217 HOE AVE.

City  
BRONX

State  
NY

Zip Code  
11237

FEC ID number of contributing  
federal political committee.

C

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

49000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 18 / 2026

Transaction ID : SA11AI.7144.0

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

### B. Westcott, Bart, , ,

Mailing Address 722 Southampton Drive

City

Palo Alto

State

CA

Zip Code

94303

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Not Employed

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11AI.7127

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Contribution earmarked through Actblue

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

### C. ACT BLUE

Mailing Address 1217 HOE AVE.

City

BRONX

State

NY

Zip Code

11237

FEC ID number of contributing  
federal political committee.

C

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

29000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 08 / 2026

Transaction ID : SA11AI.7127.0

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

**SUBTOTAL** of Receipts This Page (optional)..... ►

5000.00

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

67500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 34  
(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17  |                              |                                         |                             |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON****A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
AFFORDABLE HOUSING TAX CREDIT COALITION POLITICAL ACTION COMMITTEE (AFFORDABLE HOUSING PAC)

Mailing Address 630 I STREET NW

City  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C**

C00842583

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 26    |   | 2026        |

Transaction ID : SA11C.7210

Amount of Each Receipt this Period

1000.00

☐

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
AFLAC POLITICAL ACTION COMMITTEE (AFLAC PAC)

Mailing Address 1932 WYNNTON ROAD

City  
COLUMBUSState  
GAZip Code  
31999FEC ID number of contributing  
federal political committee.**C**

C00034157

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 26    |   | 2026        |

Transaction ID : SA11C.7213

Amount of Each Receipt this Period

1000.00

☐

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
AMERICA'S ESSENTIAL HOSPITALS POLITICAL ACTION COMMITTEE, (ESSENTIAL HOSPITALS PAC)Mailing Address 401 9TH STREET, NW  
SUITE 900City  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C**

C00602805

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 29    |   | 2026        |

Transaction ID : SA11C.7205

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 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 34  
(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. AMERICA'S PHYSICIAN GROUPS PAC**Mailing Address 611 N BRAND BLVD  
SUITE 1300City  
GLENDALEState  
CAZip Code  
91203FEC ID number of contributing  
federal political committee.**C**

C00461756

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 21 / 2026**Transaction ID : SA11C.7115**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. AMERICAN APPAREL & FOOTWEAR ASSOCIATION PAC**Mailing Address 740 6TH STREET, NW  
4TH FLOORCity  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C**

C00338442

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 10 / 2026**Transaction ID : SA11C.7166**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**C. AMERICAN FIDELITY CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 9000 CAMERON PARKWAY

City  
OKLAHOMA CITYState  
OKZip Code  
73114FEC ID number of contributing  
federal political committee.**C**

C00210526

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 29 / 2026**Transaction ID : SA11C.7208**

Amount of Each Receipt this Period

1000.00

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

3000.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 34  
(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. AMSTED INDUSTRIES INCORPORATED PAC**

Mailing Address TWO PRUDENTIAL PLAZA

180 NORTH STETSON AVE STE 1800

City

CHICAGO

State

IL

Zip Code

60601

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

C00438358

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 27    |   | 2026        |

**Transaction ID : SA11C.7121**

Amount of Each Receipt this Period

2500.00

☐

Memo Item

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

**B. BLACK & VEATCH POLITICAL ACTION COMMITTEE (BLACK & VEATCH PAC)**

Mailing Address 11401 LAMAR AVE

City

OVERLAND PARK

State

KS

Zip Code

66211

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

C00012310

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 14    |   | 2026        |

**Transaction ID : SA11C.7106**

Amount of Each Receipt this Period

5000.00

☐

Memo Item

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

**C. BOWLING PROPRIETORS' ASSOCIATION OF AMERICA, INC PAC**

Mailing Address 621 SIX FLAGS DR

City

ARLINGTON

State

TX

Zip Code

76011

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

C00079855

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 15    |   | 2026        |

**Transaction ID : SA11C.7147**

Amount of Each Receipt this Period

2500.00

☐

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

10000.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 23 OF 34  
(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. BURNS AND MCDONNELL INC. PAC**

Mailing Address 9400 WARD PARKWAY

City  
KANSAS CITYState  
MOZip Code  
64114FEC ID number of contributing  
federal political committee.**C**

C00442913

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 15    |   | 2026        |

**Transaction ID : SA11C.7108**

Amount of Each Receipt this Period

5000.00

☐

Memo Item

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

**B. CERRIS INC. POLITICAL ACTION COMMITTEE (FORMERLY KNOW AS MMC CORP PAC)**

Mailing Address 7801 W. 110TH ST.

City

OVERLAND PARK

State

KS

Zip Code

66210

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

C00509356

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 24    |   | 2026        |

**Transaction ID : SA11C.7123**

Amount of Each Receipt this Period

5000.00

☐

Memo Item

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

**C. EMPLOYEE OWNED S CORPORATIONS OF AMERICA PAC (ESCA PAC)**Mailing Address 750 9TH STREET NW  
SUITE 650

City

WASHINGTON

State

DC

Zip Code

20001

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

C00458257

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 17    |   | 2026        |

**Transaction ID : SA11C.7110**

Amount of Each Receipt this Period

2000.00

☐

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

12000.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 34  
(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. GARNEY HOLDING CO. PAC**Mailing Address 1700 SWIFT STREET  
SUITE 200City  
NORTH KANSAS CITYState  
MOZip Code  
64116FEC ID number of contributing  
federal political committee.**C**

C00442905

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2026**Transaction ID : SA11C.7117**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**B. MICHAEL BEST POLITICAL ACTION COMMITTEE**Mailing Address ONE SOUTH PINCKNEY STREET  
SUITE 700City  
MADISONState  
WIZip Code  
53703FEC ID number of contributing  
federal political committee.**C**

C00603076

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2026**Transaction ID : SA11C.7206**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**C. NATIONAL ASSOCIATION OF ACOS INC ACTION FUND**Mailing Address 2001 L STREET NW  
SUITE 500City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.**C**

C00719815

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2026**Transaction ID : SA11C.7096**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution earmarked through ActBlue

**SUBTOTAL** of Receipts This Page (optional)..... ►

7000.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 34  
(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

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

**A. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONXState  
NYZip Code  
11237FEC ID number of contributing  
federal political committee.**C**

C00714725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

24000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 01    |   | 2026        |

**Transaction ID : SA11C.7096.0**

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Total earmarked through conduit; PAC limit not affected

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

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

Mailing Address 11145 THOMPSON AVENUE

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

C00659060

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 13    |   | 2026        |

**Transaction ID : SA11C.7104**

Amount of Each Receipt this Period

3000.00

☐ Memo Item

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

**C. ROCKET LIMITED PARTNERSHIP PAC (ROCKET PAC)**

Mailing Address 101 S. WASHINGTON SQ.

SUITE 300

City  
LANSINGState  
MIZip Code  
48933FEC ID number of contributing  
federal political committee.**C**

C00388827

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐  
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06    |   | 24    |   | 2026        |

**Transaction ID : SA11C.7168**

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 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 34  
(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON****A. SAMMONS ENTERPRISES INC. POLITICAL ACTION COMMITTEE**Mailing Address 5949 SHERRY LANE  
SUITE 1900City  
DALLASState  
TXZip Code  
75225FEC ID number of contributing  
federal political committee.**C**

C00388777

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 14 / 2026**Transaction ID : SA11C.7090**

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B. SYNOPSISYS, INC. POLITICAL ACTION COMMITTEE (SYNOPSISYS PAC)**

Mailing Address 675 ALMANOR AVE

City  
SUNNYVALEState  
CAZip Code  
94085FEC ID number of contributing  
federal political committee.**C**

C00884767

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 26 / 2026**Transaction ID : SA11C.7212**

Amount of Each Receipt this Period

1500.00

☐ Memo Item**C. UNITED EGG ASSOCIATION EGGPAC**Mailing Address 6455 EAST JOHNS CROSSING  
SUITE 410City  
JOHNS CREEKState  
GAZip Code  
30097FEC ID number of contributing  
federal political committee.**C**

C00172841

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2026**Transaction ID : SA11C.7093**

Amount of Each Receipt this Period

1000.00

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

3500.00

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

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 34

(check only one)

|                              |                              |                                         |                             |
|------------------------------|------------------------------|-----------------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13  | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 |
|                              |                              |                                         | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

WYDEN FOR OREGON

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

**A. WAWA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address C/O WIPFLI, LLP

1717 ARCH STREET, SUITE 750

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

C

C00148510

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 07    |   | 2026        |

Transaction ID : SA11C.7094

Amount of Each Receipt this Period

500.00

☐

Memo Item

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

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Amount of Each Receipt this Period

☐

Memo Item

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

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

General

Aggregate Year-to-Date ▼

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|       |   |       |   |             |

Amount of Each Receipt this Period

☐

Memo Item

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

500.00

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

46000.00

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

PAGE 28 OF 34

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONXState  
NYZip Code  
11237

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 5 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C C00714725

**Transaction ID : SB21B.7103**

Amount of Each Disbursement this Period

39.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONXState  
NYZip Code  
11237

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C C00714725

**Transaction ID : SB21B.7133**

Amount of Each Disbursement this Period

395.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONXState  
NYZip Code  
11237

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 1 | 7 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C C00714725

**Transaction ID : SB21B.7140**

Amount of Each Disbursement this Period

395.00

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

829.50

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

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

PAGE 29 OF 34

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONXState  
NYZip Code  
11237

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 2 | 4 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C C00714725

**Transaction ID : SB21B.7162**

Amount of Each Disbursement this Period

987.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONXState  
NYZip Code  
11237

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 1 | 4 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C C00714725

**Transaction ID : SB21B.7196**

Amount of Each Disbursement this Period

237.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ACT BLUE**

Mailing Address 1217 HOE AVE.

City  
BRONXState  
NYZip Code  
11237

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

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

FEC Identification Number

C C00714725

**Transaction ID : SB21B.7172**

Amount of Each Disbursement this Period

316.00

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

1540.50

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

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

PAGE 30 OF 34

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address PO Box 15731

City  
WilmingtonState  
DEZip Code  
19886

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 1 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.7092

Amount of Each Disbursement this Period

222.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address PO Box 15731

City  
WilmingtonState  
DEZip Code  
19886

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

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

FEC Identification Number

C

Transaction ID : SB21B.7119

Amount of Each Disbursement this Period

222.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bank of America**

Mailing Address PO Box 15731

City  
WilmingtonState  
DEZip Code  
19886

Purpose of Disbursement

Credit card processing fees

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 6 |   |   | 0 | 1 |   |   | 2 | 0 | 2 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.7177

Amount of Each Disbursement this Period

222.20

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

666.60

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

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

PAGE 31 OF 34

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. Columbia Bank Card Services**

Mailing Address PO Box 35142

City  
SeattleState  
WAZip Code  
98124

Purpose of Disbursement

Credit card payment

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 1 |   |   | 2 | 0 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.7112

Amount of Each Disbursement this Period

2976.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bistro Cacao**

Mailing Address 316 Massachusetts Avenue NE

City  
WashingtonState  
DCZip Code  
20002

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 1 |   |   | 2 | 0 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.7112.c

Amount of Each Disbursement this Period

2310.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Monocle on Capitol Hill**

Mailing Address 107 D street NE Washington

City  
WashingtonState  
DCZip Code  
20002

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 2 | 1 |   |   | 2 | 0 | 6 |   |   |

FEC Identification Number

C

Transaction ID : SB21B.7112.

Amount of Each Disbursement this Period

666.20

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

2976.20

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

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

PAGE 32 OF 34

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a            | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. Columbia Bank Card Services**

Mailing Address PO Box 35142

City  
SeattleState  
WAZip Code  
98124

Purpose of Disbursement

Credit card payment

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.7159

Amount of Each Disbursement this Period

1977.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bistro Cacao**

Mailing Address 316 Massachusetts Avenue NE

City  
WashingtonState  
DCZip Code  
20002

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.7159.c

Amount of Each Disbursement this Period

1226.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Monocle on Capitol Hill**

Mailing Address 107 D street NE Washington

City  
WashingtonState  
DCZip Code  
20002

Purpose of Disbursement

Catering

Candidate Name

003

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.7159.

Amount of Each Disbursement this Period

751.80

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

1977.80

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

7990.60

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 OF 34

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

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NAME OF COMMITTEE (In Full)

**WYDEN FOR OREGON**

Full Name (Last, First, Middle Initial)

**A. WYDEN FOR SENATE**

Mailing Address 1220 SW Morrison  
Suite 910

City  
PORTLAND

State  
OR

Zip Code  
97205

Purpose of Disbursement

Jt. Fundraising Transfer

008

Candidate Name

WYDEN, RONALD LEE, , ,

Category/  
Type

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For: 2028

☒ Primary

☐ General

☐ Other (specify) ▼

State: OR

District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2026

FEC Identification Number

C S6OR00110

Transaction ID : SB22.7219

Amount of Each Disbursement this Period

102000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify)

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

102000.00

102000.00

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

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b            | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26 | <input type="checkbox"/> 27  |
| <input checked="" type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

PAGE 34 OF 34

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NAME OF COMMITTEE (In Full)

WYDEN FOR OREGON

Full Name (Last, First, Middle Initial)

A. Jaffe, Morris, , , Jr.

Mailing Address PO Box 4829

City  
Horshoe BayState  
TXZip Code  
78657

Purpose of Disbursement

Refund

Candidate Name

010

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

FEC Identification Number

C

Transaction ID : SB28A.7215

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

3500.00

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

3500.00