

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

TUBERVILLE FOR SENATE, INC

ADDRESS (number and street)

PO BOX 590012

Check if different
than previously
reported. (ACC)

BIRMINGHAM

AL

35259

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00701672

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

AL

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

04

D D /

01

Y Y Y Y

2026

through

M M /

06

D D /

30

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 JONES, RANDALL, E, ,

Signature of Treasurer

JONES, RANDALL, E, ,

Date

M M /

07

D D /

15

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 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

TUBERVILLE FOR SENATE, INC

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	12.50	3798666.72
(b) Total Contribution Refunds (from Line 20(d))	70.00	544950.01
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 57.50	3253716.71
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	25950.20	4036861.65
(b) Total Offsets to Operating Expenditures (from Line 14)	1603.90	28014.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	24346.30	4008847.65
8. Cash on Hand at Close of Reporting Period (from Line 27)	66589.77	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	11814.88	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

TUBERVILLE FOR SENATE, INC

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
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

0.00

1925538.07

(ii) Unitemized.....

12.50

1126478.65

(iii) TOTAL of contributions from individuals ▶

12.50

3052016.72

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

746650.00

(d) The Candidate.....

0.00

0.00

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

12.50

3798666.72

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

266856.55

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

1603.90

28014.00

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

0.00

6170.40

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

1616.40

4099707.67

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25950.20	4036861.65
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	129841.37
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	129841.37
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	70.00	383250.01
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	161700.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	70.00	544950.01
21. OTHER DISBURSEMENTS	0.00	16000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	26020.20	4727653.03

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	90993.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1616.40
25. SUBTOTAL (add Line 23 and Line 24).....	92609.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	26020.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	66589.77

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 14

☐ 11a ☐ 11b ☐ 11c ☒ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

TUBERVILLE FOR SENATE, INC

Full Name (Last, First, Middle Initial)

NRSC

A.

Mailing Address 425 2ND STREET NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C C00027466

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

1684.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 04 2026

Transaction ID : SA14.8956

Amount of Each Receipt this Period

1603.90

☐ Memo Item

REFUND: TRAVEL

Full Name (Last, First, Middle Initial)

DELTA AIRLINES

B.

Mailing Address CORPORATE HQ
1030 DELTA BLVD

City

ATLANTA

State

GA

Zip Code

30320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

1833.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 04 2026

Transaction ID : SA14.8957

Amount of Each Receipt this Period

1603.90

☒ Memo Item

REFUND: TRAVEL

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

1603.90

1603.90

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

TUBERVILLE FOR SENATE, INC

Full Name (Last, First, Middle Initial)

A. MCGRAW-WEBB CHEVROLET

Mailing Address 29 CAMDEN BYPASS

City
CAMDENState
ALZip Code
36726Purpose of Disbursement
CAMPAIGN VEHICLE LEASE EXPENSE

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 03 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1695.23

Transaction ID : SB17.I8966

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARD SERVICES

Mailing Address P.O. BOX 84070

City
COLUMBUSState
GAZip Code
31908Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

4904.57

Transaction ID : SB17.I8971

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BICE PALM BEACH

Mailing Address 313 WORTH AVENUE

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
FOOD / BEVERAGE

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 15 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

724.84

Transaction ID : SB17.I8975

☒ Memo Item

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

6599.80

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

TUBERVILLE FOR SENATE, INC

Full Name (Last, First, Middle Initial)

A. THE BEN AUTOGRAPH

Mailing Address 251 N NARCISSUS AVE

City
WEST PALM BEACHState
FLZip Code
33401Purpose of Disbursement
TRAVEL / FOOD / BEVERAGE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

4179.73

Transaction ID : SB17.I8974

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CARD SERVICES

Mailing Address P.O. BOX 84070

City
COLUMBUSState
GAZip Code
31908Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

359.17

Transaction ID : SB17.I8972

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address 208 S AKARD STREET

City
DALLASState
TXZip Code
75202Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

204.07

Transaction ID : SB17.I8976

☒ Memo Item

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

359.17

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

TUBERVILLE FOR SENATE, INC

Full Name (Last, First, Middle Initial)

A. X CORPMailing Address 1355 MARKET ST
SUITE 900City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

155.10

Transaction ID : SB17.I8977

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDIMailing Address 1593 SPRING HILL ROAD
SUITE 400City
TYSONS CORNERState
VAZip Code
22812Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1800.00

Transaction ID : SB17.I8961

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCGRAW-WEBB CHEVROLET

Mailing Address 29 CAMDEN BYPASS

City
CAMDENState
ALZip Code
36726Purpose of Disbursement
CAMPAIGN VEHICLE LEASE EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		04		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1695.23

Transaction ID : SB17.I8965

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

3495.23

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

TUBERVILLE FOR SENATE, INC

Full Name (Last, First, Middle Initial)

A. CROSBY OTTENHOFF GROUP

Mailing Address 421 OFFICE PARK DR

City
MOUNTAIN BROOKState
ALZip Code
35223Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1192.50

Transaction ID : SB17.I8962

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LEX POLITICA, PLLC

Mailing Address PO BOX 341016

City
AUSTINState
TXZip Code
78734Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

142.50

Transaction ID : SB17.I8963

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ATTUNE

Mailing Address 60 BROAD ST

City
NEW YORKState
NYZip Code
10004Purpose of Disbursement
INSURANCE

Candidate Name

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

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1561.38

Transaction ID : SB17.I8958

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

2896.38

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

TUBERVILLE FOR SENATE, INC

Full Name (Last, First, Middle Initial)

A. PROGRESSIVE

Mailing Address PO BOX 94739

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2026

City
CLEVELANDState
OHZip Code
44101

FEC Identification Number

C

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6508.00

Transaction ID : SB17.I8967

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. CMDIMailing Address 1593 SPRING HILL ROAD
SUITE 400

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2026

City
TYSONS CORNERState
VAZip Code
22812

FEC Identification Number

C

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1800.00

Transaction ID : SB17.I8960

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. THREE ARBOR INSURANCE, INC.Mailing Address 2828 OLD 280 COURT
SUITE 126

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2026

City
VESTAVIAState
ALZip Code
35243

FEC Identification Number

C

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

504.00

Transaction ID : SB17.I8968

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

8812.00

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

TUBERVILLE FOR SENATE, INC

Full Name (Last, First, Middle Initial)

A. MCGRAW-WEBB CHEVROLET

Mailing Address 29 CAMDEN BYPASS

City
CAMDENState
ALZip Code
36726Purpose of Disbursement
CAMPAIGN VEHICLE LEASE EXPENSE

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 03 / 2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1695.23

Transaction ID : SB17.I8964

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARD SERVICES

Mailing Address P.O. BOX 84070

City
COLUMBUSState
GAZip Code
31908Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

292.39

Transaction ID : SB17.I8973

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address 208 S AKARD STREET

City
DALLASState
TXZip Code
75202Purpose of Disbursement
PHONE SERVICE

Candidate Name

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

208.39

Transaction ID : SB17.I8979

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

1987.62

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

TUBERVILLE FOR SENATE, INC

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPITHEATER PARKWAY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

84.00

Transaction ID : SB17.I8978

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDIMailing Address 1593 SPRING HILL ROAD
SUITE 400City
TYSONS CORNERState
VAZip Code
22812Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1800.00

Transaction ID : SB17.I8959

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1800.00

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

25950.20

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 14

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.01

TUBERVILLE FOR SENATE, INC

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

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

TUBERVILLE, THOMAS, H., ,

Mailing Address

379 CHERRY STREET

City

AUBURN

State

AL

ZIP Code

36830

☒ Personal Funds of the Candidate

Original Amount of Loan

1000000.00

Cumulative Payment To Date

989841.37

Balance Outstanding at Close of This Period

10158.63

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 / 27 / 2019M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ /M M / D D / Y Y Y Y
/ /

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10158.63

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

10158.63

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

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

PAGE 14 OF 14

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

NAME OF COMMITTEE (In Full)

TUBERVILLE FOR SENATE, INC

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

CROSBY OTTENHOFF GROUP

Nature of Debt (Purpose):

COMPLIANCE CONSULTING

Mailing Address 421 OFFICE PARK DR

City

MOUNTAIN BROOK

State

AL

Zip Code

35223

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.1

Amount Incurred This Period

1656.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

1656.25

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

1656.25

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

1656.25

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

10158.63

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

11814.88