

**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

David Scott for Congress

ADDRESS (number and street)

P.O. BOX 960821



Check if different than previously reported. (ACC)

Riverdale

GA

30296

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00369801

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

GA

13

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2025

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2025

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

Type or Print Name of Treasurer Scott, Alfredia, Aaron, ,

Signature of Treasurer

Scott, Alfredia, Aaron, ,

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

15

Y Y Y Y

2025

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

David Scott for Congress

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | 63641.00 | 135902.43 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 63641.00 | 135902.43 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 62992.14 | 243864.12 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 62992.14 | 243864.12 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 212209.77 | |
| 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) | 107350.00 | |

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

David Scott for Congress

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

0.00

2500.00

(ii) Unitemized

141.00

402.43

(iii) TOTAL of contributions
from individuals ▶

141.00

2902.43

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

63500.00

133000.00

(d) The Candidate

0.00

0.00

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

63641.00

135902.43

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

45000.00

55000.00

(b) All Other Loans.....

0.00

0.00

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

45000.00

55000.00

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

0.00

0.00

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

0.49

1.27

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

108641.49

190903.70

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..... | 62992.14 | 243864.12 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 1000.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 62992.14 | 244864.12 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 166560.42 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 108641.49 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 275201.91 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 62992.14 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 212209.77 |

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

PAGE 5 OF 42

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

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)

David Scott for Congress

Full Name (Last, First, Middle Initial)

AFLAC POLITICAL ACTION COMMITTEE (AFLAC PAC)

Mailing Address 1932 Wynnton Rd

City
ColumbusState
GAZip Code
31999-0001

Date of Receipt

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

Transaction ID : 22790032

FEC ID number of contributing
federal political committee.

C C00034157

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ALLY FINANCIAL INC. ADVOCACY POLITICAL ACTION COMMITTEE

Mailing Address 25 Massachusetts Ave NW
Ste 350City
WashingtonState
DCZip Code
20001-7404

Date of Receipt

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

Transaction ID : 22770794

FEC ID number of contributing
federal political committee.

C C00579540

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 1050 31St St NW

City
WashingtonState
DCZip Code
20007-4405

Date of Receipt

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

Transaction ID : 22759004

FEC ID number of contributing
federal political committee.

C C00024521

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

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 3) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 42

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

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)

David Scott for Congress

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Ave NW
Ste 600

City
Washington

State
DC

Zip Code
20036-3971

FEC ID number of contributing
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : 22599656

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Ave NW
Ste 600

City
Washington

State
DC

Zip Code
20036-3971

FEC ID number of contributing
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : 22599662

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN FOREST & PAPER ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 K St NW
Ste 700

City
Washington

State
DC

Zip Code
20005-7033

FEC ID number of contributing
federal political committee.

C C00029348

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : 22794423

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

12500.00

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

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

PAGE 7 OF 42

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

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)

David Scott for Congress

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

A.

Mailing Address 251 H St NW

City

Washington

State

DC

Zip Code

20001-2604

FEC ID number of contributing
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : 22599678

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE (ASA PAC)

B.

Mailing Address 1061 American Ln

City

Schaumburg

State

IL

Zip Code

60173-4973

FEC ID number of contributing
federal political committee.

C C00255752

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : 22759139

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN SOYBEAN ASSOCIATION PAC (SOYPAC)

C.

Mailing Address 12647 Olive Blvd
Ste 410

City

Saint Louis

State

MO

Zip Code

63141-6345

FEC ID number of contributing
federal political committee.

C C00408468

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : 22790034

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

9500.00

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

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 8 OF 42

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

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)

David Scott for Congress

Full Name (Last, First, Middle Initial)

AMERIPRISE FINANCIAL INC. POLITICAL ACTION COMMITTEE (AMERIPRISEPAC)

Mailing Address 101 Constitution Ave NW
912W

City
Washington

State
DC

Zip Code
20001-2133

FEC ID number of contributing
federal political committee.

C C00414474

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : 22794429

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 Pennsylvania Ave NW
Ste 1000

City
Washington

State
DC

Zip Code
20004-2524

FEC ID number of contributing
federal political committee.

C C00008474

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : 22794426

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUMANE WORLD ACTION FUND POLITICAL ACTION COMMITTEE

Mailing Address 1255 23Rd St NW
Ste 455

City
Washington

State
DC

Zip Code
20037-1125

FEC ID number of contributing
federal political committee.

C C00466813

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 25 2025

Transaction ID : 22790037

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

5500.00

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

PAGE 9 OF 42

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

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)

David Scott for Congress

Full Name (Last, First, Middle Initial)

INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURPAC)

A.

Mailing Address 412 1St St SE
Ste 300City
WashingtonState
DCZip Code
20003-1804FEC ID number of contributing
federal political committee.

C C00022343

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : 22770798

Amount of Each Receipt this Period

2500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 Crystal Dr
Ste 100City
ArlingtonState
VAZip Code
22202-4108FEC ID number of contributing
federal political committee.

C C00303024

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 25 2025

Transaction ID : 22759135

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 Crystal Dr
Ste 100City
ArlingtonState
VAZip Code
22202-4108FEC ID number of contributing
federal political committee.

C C00303024

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 25 2025

Transaction ID : 22790035

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 42

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

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)

David Scott for Congress

Full Name (Last, First, Middle Initial)

NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE

A.

Mailing Address 4300 Wilson Blvd
Ste 400

City
Arlington

State
VA

Zip Code
22203-4167

FEC ID number of contributing
federal political committee.

C C00113241

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 25 2025

Transaction ID : 22790031

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SAVE DEMOCRACY PAC

B.

Mailing Address 8860 Apple Hill Rd

City
Chagrin Falls

State
OH

Zip Code
44023-5822

FEC ID number of contributing
federal political committee.

C C00884973

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : 22791167

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION POLITICAL ACTION COMMITTEE

C.

Mailing Address 1101 New York Ave NW
Ste 800

City
Washington

State
DC

Zip Code
20005-4279

FEC ID number of contributing
federal political committee.

C C00431312

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 27 2025

Transaction ID : 22759081

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

8500.00

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

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

PAGE 11 OF 42

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

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)

David Scott for Congress

Full Name (Last, First, Middle Initial)
SYLVAMO CORPORATION PAC

A.

Mailing Address 1300 I St NW
Ste 400ECity
WashingtonState
DCZip Code
20005-3318FEC ID number of contributing
federal political committee.

C C00789602

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : 22759137

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)
TD BANK N.A. POLITICAL ACTION COMMITTEEMailing Address 125 Park Ave
Fl 24City
New YorkState
NYZip Code
10017-8511FEC ID number of contributing
federal political committee.

C C00501429

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : 22794414

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)
THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COMMITTEEMailing Address 101 Constitution Ave NW
Ste 1000ECity
WashingtonState
DCZip Code
20001-2171FEC ID number of contributing
federal political committee.

C C00350744

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : 22794439

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

4500.00

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

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

PAGE 12 OF 42

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

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)

David Scott for Congress

Full Name (Last, First, Middle Initial)

THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

A.

Mailing Address PO Box 724087

City

Atlanta

State

GA

Zip Code

31139-1087

FEC ID number of contributing
federal political committee.

C C00284885

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 25 2025

Transaction ID : 22759544

Amount of Each Receipt this Period

2500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

UNITED STATES PEANUT POLITICAL ACTION COMMITTEE (US PEANUT PAC)

Mailing Address 313 Massachusetts Ave NE

City

Washington

State

DC

Zip Code

20002-5701

FEC ID number of contributing
federal political committee.

C C00502807

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : 22599666

Amount of Each Receipt this Period

5000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 SW 8Th St

City

Bentonville

State

AR

Zip Code

72716-6209

FEC ID number of contributing
federal political committee.

C C00093054

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 27 2025

Transaction ID : 22759002

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

8500.00

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

63500.00

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

PAGE 13 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

Scott, David, A., ,

A. Mailing Address 162 Hurt St NE

City
AtlantaState
GAZip Code
30307-2538FEC ID number of contributing
federal political committee.

C H2GA13012

Name of Employer
US GovernmentOccupation
Member Of Congress

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

35000.00

Date of Receipt

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

Transaction ID : 22599673

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Scott, David, A., ,

B. Mailing Address 162 Hurt St NE

City
AtlantaState
GAZip Code
30307-2538FEC ID number of contributing
federal political committee.

C H2GA13012

Name of Employer
US GovernmentOccupation
Member Of Congress

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

55000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 26 2025

Transaction ID : 22770790

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

45000.00

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

45000.00

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

PAGE 14 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 981540

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 14 | | 2025 |

City
El PasoState
TXZip Code
79998-1540

FEC Identification Number

C

Purpose of Disbursement
Itemized Transactions Below

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

29978.59

Transaction ID : 500591266

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Angerholzer Broz Consulting

Mailing Address 1 M St SE

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 14 | | 2025 |

City
WashingtonState
DCZip Code
20003-5125

FEC Identification Number

C

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10000.00

Transaction ID : 500596342

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Angerholzer Broz Consulting

Mailing Address 1 M St SE

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 14 | | 2025 |

City
WashingtonState
DCZip Code
20003-5125

FEC Identification Number

C

Purpose of Disbursement
Fundraising Expenses

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

7688.83

Transaction ID : 500596343

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

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

29978.59

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

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

PAGE 15 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Apple Store

Mailing Address 3393 Peachtree Rd NE

City
AtlantaState
GAZip Code
30326-1162Purpose of Disbursement
Computer Equipment

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 |
| 0 | 4 | | 1 | 4 | | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2946.26

Transaction ID : 500596349

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Capital Grille

Mailing Address 601 Pennsylvania Ave NW

City
WashingtonState
DCZip Code
20004-2601Purpose 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 |
| 0 | 4 | | 1 | 4 | | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

110.00

Transaction ID : 500596341

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address PO Box 20706

City
AtlantaState
GAZip Code
30320-6001Purpose of Disbursement
Travel Expenses

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 |
| 0 | 4 | | 1 | 4 | | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1879.34

Transaction ID : 500596340

☒ Memo Item *

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

0.00

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

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

PAGE 16 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. FedExOffice

Mailing Address 100 Peachtree St NW

City
AtlantaState
GAZip Code
30303-1906Purpose of Disbursement
Shipping

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : 500596344

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Fine StationeryMailing Address 201 W 14Th St
100City
WilmingtonState
DEZip Code
19801-1114Purpose of Disbursement
Printing

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6972.08

Transaction ID : 500596348

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Hertz

Mailing Address 4003 Main St

City
College ParkState
GAZip Code
30337-4309Purpose of Disbursement
Car Rental

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

127.95

Transaction ID : 500596345

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

0.00

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

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

PAGE 17 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1455 Market St

City
San FranciscoState
CAZip Code
94103-1331Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

64.16

Transaction ID : 500596347

☒ Memo Item ***B. American Express**

Mailing Address PO Box 981540

City
El PasoState
TXZip Code
79998-1540Purpose of Disbursement
Itemized Transactions Below

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

19307.32

Transaction ID : 500591276

☐ Memo Item**C. Angerholzer Broz Consulting**

Mailing Address 1 M St SE

City
WashingtonState
DCZip Code
20003-5125Purpose of Disbursement
Fundraising Expenses

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

68.09

Transaction ID : 500596321

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

19307.32

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

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

PAGE 18 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Angerholzer Broz Consulting

Mailing Address 1 M St SE

Date of Disbursement

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

City
WashingtonState
DCZip Code
20003-5125

FEC Identification Number

C

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5000.00

Transaction ID : 500596324

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Best Buy

Mailing Address 1210 Caroline St NE

Date of Disbursement

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

City
AtlantaState
GAZip Code
30307-2706

FEC Identification Number

C

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

298.22

Transaction ID : 500596329

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Capital Grille

Mailing Address 601 Pennsylvania Ave NW

Date of Disbursement

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

City
WashingtonState
DCZip Code
20004-2601

FEC Identification Number

C

Purpose of Disbursement
Food & Beverage

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

226.60

Transaction ID : 500596318

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

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

0.00

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

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

PAGE 19 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Cartridge WorldMailing Address 3106 N US Highway 12
Ste ACity
Spring GroveState
ILZip Code
60081-9362Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1334.00

Transaction ID : 500596328

☒ Memo Item ***B. Delta Airlines**

Mailing Address PO Box 20706

City
AtlantaState
GAZip Code
30320-6001Purpose of Disbursement
Travel Expenses

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1293.37

Transaction ID : 500596339

☒ Memo Item ***C. Enterprise Leasing**Mailing Address 2200 Rental Car Center Pkwy
2210City
College ParkState
GAZip Code
30337Purpose of Disbursement
Van Rental

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

829.55

Transaction ID : 500596331

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

0.00

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

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

PAGE 20 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. FTD

Mailing Address 3113 Woodcreek Dr

Date of Disbursement

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

City
Downers GroveState
ILZip Code
60515-5412

FEC Identification Number

C

Purpose of Disbursement
Flowers

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

232.10

Transaction ID : 500596336

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Office Depot

Mailing Address 1205 Caroline St NE

Date of Disbursement

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

City
AtlantaState
GAZip Code
30307-2705

FEC Identification Number

C

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

467.20

Transaction ID : 500596334

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Paper Source

Mailing Address 3019 M St NW

Date of Disbursement

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

City
WashingtonState
DCZip Code
20007-3702

FEC Identification Number

C

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

225.99

Transaction ID : 500596333

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

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

0.00

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

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

PAGE 21 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Posty Cards Inc.

Mailing Address 1600 Olive St

Date of Disbursement

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

City
Kansas CityState
MOZip Code
64127-2539

FEC Identification Number

C

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4220.00

Transaction ID : 500596323

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Sam's Club

Mailing Address 150 Cobb Pkwy S

Date of Disbursement

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

City
MariettaState
GAZip Code
30060-9209

FEC Identification Number

C

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

390.88

Transaction ID : 500596330

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Sensational Baskets

Mailing Address 2660 Holcomb Bridge Rd

Date of Disbursement

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

City
AlpharettaState
GAZip Code
30022-5949

FEC Identification Number

C

Purpose of Disbursement
Flowers

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

599.10

Transaction ID : 500596335

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

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

0.00

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

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

PAGE 22 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Shell Oil Company

Mailing Address PO Box 2463

Date of Disbursement

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

City
HoustonState
TXZip Code
77252-2463

FEC Identification Number

C

Purpose of Disbursement
Gas

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

142.00

Transaction ID : 500596332

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. The Congressional Club Museum And Foundation

Mailing Address 2001 New Hampshire Ave NW

Date of Disbursement

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

City
WashingtonState
DCZip Code
20009-3414

FEC Identification Number

C

Purpose of Disbursement
Event Tickets

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3000.00

Transaction ID : 500596338

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. U.S. Postal Service

Mailing Address 6691 Church St

Date of Disbursement

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

City
RiverdaleState
GAZip Code
30274-2213

FEC Identification Number

C

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

365.00

Transaction ID : 500596326

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

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

0.00

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

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

PAGE 23 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Uline Shipping Supplies

Mailing Address 1770 Satellite Blvd

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 13 | | 2025 |

City
BufordState
GAZip Code
30518-5028

FEC Identification Number

C

Purpose of Disbursement
Shipping Supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

379.29

Transaction ID : 500596337

☒ Memo Item *

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address 208 S Akard St

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 17 | | 2025 |

City
DallasState
TXZip Code
75202-4206

FEC Identification Number

C

Purpose of Disbursement
Telephone & Internet

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

426.71

Transaction ID : 500591269

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address 208 S Akard St

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 05 | | 20 | | 2025 |

City
DallasState
TXZip Code
75202-4206

FEC Identification Number

C

Purpose of Disbursement
Telephone & Internet

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

426.83

Transaction ID : 500591278

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

853.54

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

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

PAGE 24 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 208 S Akard St

City
DallasState
TXZip Code
75202-4206Purpose of Disbursement
Telephone & Internet

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 |
| 0 | 6 | | 1 | 7 | | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

426.83

Transaction ID : 500595347

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Comcast

Mailing Address 12 PIEDMONT Ctr NW

City
AtlantaState
GAZip Code
30305Purpose of Disbursement
Internet and Cable

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 |
| 0 | 4 | | 2 | 9 | | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

114.74

Transaction ID : 500591271

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Comcast

Mailing Address 12 PIEDMONT Ctr NW

City
AtlantaState
GAZip Code
30305Purpose of Disbursement
Internet and Cable

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 |
| 0 | 5 | | 2 | 9 | | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

114.74

Transaction ID : 500591281

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

656.31

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

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

PAGE 25 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Comcast

Mailing Address 12 PIEDMONT Ctr NW

City
AtlantaState
GAZip Code
30305Purpose of Disbursement
Internet and Cable

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 |
| 0 | 6 | | 3 | 0 | | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

114.74

Transaction ID : 500595351

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Extra Space Storage

Mailing Address 600 Virginia Ave NE

City
AtlantaState
GAZip Code
30306-5125Purpose of Disbursement
Storage

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 |
| 0 | 4 | | 1 | 6 | | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

294.10

Transaction ID : 500591268

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Extra Space Storage

Mailing Address 600 Virginia Ave NE

City
AtlantaState
GAZip Code
30306-5125Purpose of Disbursement
Storage

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 |
| 0 | 5 | | 1 | 6 | | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

320.70

Transaction ID : 500591277

☐ Memo Item

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

729.54

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

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

PAGE 26 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Extra Space Storage

Mailing Address 600 Virginia Ave NE

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 16 | | 2025 |

City
AtlantaState
GAZip Code
30306-5125

FEC Identification Number

C

Purpose of Disbursement
Storage

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

320.70

Transaction ID : 500595346

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. NGP VAN Inc.Mailing Address 655 15Th St NW
Ste 650

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 03 | | 2025 |

City
WashingtonState
DCZip Code
20005-5701

FEC Identification Number

C

Purpose of Disbursement
Database Software

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

632.59

Transaction ID : 500590644

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Posty Cards Inc.

Mailing Address 1600 Olive St

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 05 | | 2025 |

City
Kansas CityState
MOZip Code
64127-2539

FEC Identification Number

C

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3750.00

Transaction ID : 500590646

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

4703.29

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

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

PAGE 27 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Public StorageMailing Address 6255 GA Hwy
85City
RiverdaleState
GAZip Code
30274Purpose of Disbursement
Storage Unit

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

536.00

Transaction ID : 500591264

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Public StorageMailing Address 6255 GA Hwy
85City
RiverdaleState
GAZip Code
30274Purpose of Disbursement
Storage Unit

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

371.00

Transaction ID : 500591265

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Public StorageMailing Address 6255 GA Hwy
85City
RiverdaleState
GAZip Code
30274Purpose of Disbursement
Storage Unit

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

371.00

Transaction ID : 500591274

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

1278.00

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

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

PAGE 28 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. Public StorageMailing Address 6255 GA Hwy
85City
RiverdaleState
GAZip Code
30274Purpose of Disbursement
Storage Unit

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

536.00

Transaction ID : 500591275

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Public StorageMailing Address 6255 GA Hwy
85City
RiverdaleState
GAZip Code
30274Purpose of Disbursement
Storage Unit

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

536.00

Transaction ID : 500595344

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Public StorageMailing Address 6255 GA Hwy
85City
RiverdaleState
GAZip Code
30274Purpose of Disbursement
Storage Unit

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

371.00

Transaction ID : 500595345

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

1443.00

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

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

PAGE 29 OF 42

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

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

NAME OF COMMITTEE (In Full)

David Scott for Congress

Full Name (Last, First, Middle Initial)

A. U.S. Postal Service

Mailing Address 6691 Church St

City
RiverdaleState
GAZip Code
30274-2213Purpose of Disbursement
Postage

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 | | 08 | | 2025 |

FEC Identification Number

C

Amount of Each Disbursement this Period

192.00

Transaction ID : 500590647

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. U.S. Postal Service

Mailing Address 6691 Church St

City
RiverdaleState
GAZip Code
30274-2213Purpose of Disbursement
Postage and Shipping Supplies

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 | | 01 | | 2025 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : 500595834

☐ 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).....▶

3692.00

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

62641.59

SCHEDULE C (FEC Form 3)
LOANS

PAGE 30 OF 42

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 : 8924927L

David Scott for Congress

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

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 14 / 2012

M M / D D / Y Y Y Y

On Demand

N/A % (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).....▶

1000.00

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

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

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

PAGE 31 OF 42

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

NAME OF COMMITTEE (In Full)

Transaction ID : 9435079L

David Scott for Congress

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

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

700.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

700.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 17 / 2018

M M / D D / Y Y Y Y

On Demand

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).....▶

700.00

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

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

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

PAGE 32 OF 42

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

NAME OF COMMITTEE (In Full)

Transaction ID : 19273236L

David Scott for Congress

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 29 / 2023

M M / D D / Y Y Y Y

On Demand

N/A

% (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).....▶

5000.00

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

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

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

PAGE 33 OF 42

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

NAME OF COMMITTEE (In Full)

Transaction ID : 19994389L

David Scott for Congress

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 29 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

N/A % (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).....▶

10000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 34 OF 42

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 : 19994388L

David Scott for Congress

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 29 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

N/A % (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).....▶

15000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 35 OF 42

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 : 19994391L

David Scott for Congress

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

4000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 29 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

N/A % (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).....▶

4000.00

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

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

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

PAGE 36 OF 42

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

NAME OF COMMITTEE (In Full)

Transaction ID : 19994373L

David Scott for Congress

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 29 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

N/A % (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).....▶

5000.00

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

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

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

PAGE 37 OF 42

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

NAME OF COMMITTEE (In Full)

Transaction ID : 19994390L

David Scott for Congress

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 29 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

N/A % (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).....▶

6000.00

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

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

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

PAGE 38 OF 42

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

NAME OF COMMITTEE (In Full)

Transaction ID : 21481564L

David Scott for Congress

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

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 13 / 2024

M M / D D / Y Y Y Y

On Demand

N/A

% (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).....▶

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 39 OF 42

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 : 22219643L

David Scott for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 10 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

N/A % (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).....▶

10000.00

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

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

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

PAGE 40 OF 42

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

NAME OF COMMITTEE (In Full)

Transaction ID : 22599673L

David Scott for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

On Demand

N/A % (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).....▶

25000.00

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

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

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

PAGE 41 OF 42

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

NAME OF COMMITTEE (In Full)

Transaction ID : 22770790L

David Scott for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Scott, David, A., ,

Mailing Address

162 Hurt St NE

City

Atlanta

State

GA

ZIP Code

30307-2538

☒ Personal Funds of the Candidate

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 / 26 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

N/A % (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).....▶

20000.00

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

106700.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 42 OF 42

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

David Scott for Congress

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

Erickson & Company

Nature of Debt (Purpose):

Fundraising Services

Mailing Address 38 Ivy St SE

City

Washington

State

DC

Zip Code

20003-4006

Outstanding Balance Beginning This Period

650.00

Transaction ID : 1250001099

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

650.00

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)

650.00

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

650.00

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

106700.00

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

107350.00