

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

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

1 2 F E 4 M 5

LANGWORTHY FOR CONGRESS

ADDRESS (number and street)

PO BOX 120

Check if different  
than previously  
reported. (ACC)

CLARENCE

NY

14031-0120

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00817932

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

NY

23

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 /

01

D D /

01

Y Y Y Y

2025

through

M M /

03

D D /

31

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

BROGHAMER, KEVIN, , ,

Signature of Treasurer

BROGHAMER, KEVIN, , ,

Date

M M /

04

D D /

14

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

**LANGWORTHY FOR CONGRESS**

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2025

To:

MM / DD / YYYY  
03 / 31 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	344330.79	393394.32
(b) Total Contribution Refunds (from Line 20(d)) .....	800.04	2050.04
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	343530.75	391344.28
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	93970.39	183633.61
(b) Total Offsets to Operating Expenditures (from Line 14) .....	1049.05	3119.63
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	92921.34	180513.98
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	1425637.66	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

LANGWORTHY FOR CONGRESS

Report Covering the Period:

From:

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

To:

M M / D D / Y Y Y Y  
03 / 31 / 2025**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

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

169055.04

196905.04

(ii) Unitemized .....

7883.75

17197.28

(iii) TOTAL of contributions  
from individuals ▶

176938.79

214102.32

(b) Political Party Committees.....

397.00

497.00

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

166995.00

178795.00

(d) The Candidate .....

0.00

0.00

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

344330.79

393394.32

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

72303.40

72303.40

## 13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

1049.05

3119.63

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

8916.76

9427.51

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

426600.00

478244.86

# **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.....

93970.39

183633.61

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 .....

300.04

300.04

(b) Political Party Committees.....

0.00

0.00

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

500.00

1750.00

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

800.04

2050.04

21. OTHER DISBURSEMENTS .....

0.00

0.00

22. **TOTAL DISBURSEMENTS**

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

94770.43

185683.65

**III. CASH SUMMARY**

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

1093808.09

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

426600.00

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

1520408.09

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

94770.43

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

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

1425637.66

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AGHALAR, JAHAN, , ,

**A.** Mailing Address 46 OLD POND ROAD

City

GREAT NECK

State

NY

Zip Code

11023-1031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025D D / Y Y Y Y Y Y  
25 / 2025Y Y Y Y Y Y  
2025

Transaction ID : AE78503A9B6D4490388F

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 25 / 2025D D / Y Y Y Y Y Y  
25 / 2025Y Y Y Y Y Y  
2025

Transaction ID : A59E352266DFA433DB6E

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ALLEN, SCOTT, S., , JR.

**C.** Mailing Address 201 ADMIRALS WALK

City

BUFFALO

State

NY

Zip Code

14202-4331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIPPES MATHIAS LLP

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : AC6750C555197495D937

Amount of Each Receipt this Period

2300.00

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

2550.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ANDOLINA, RICHARD, , ,

**A.** Mailing Address 24 MEADOWBROOK RDCity  
ARKPORTState  
NYZip Code  
14807-9547FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
DENTIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A29D5EB80C5934546B05

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ARTHUR, BRADLEY, J., ,

**B.** Mailing Address 20 HUNT CLUB CIR  
APT ACity  
EAST AMHERSTState  
NYZip Code  
14051-1789FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BLACK ROCK PHARMACYOccupation  
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 13 2025

Transaction ID : AD2F23F1AEC8A492CA58

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ARTHUR, DONALD, W., , JR.

**C.** Mailing Address 47 DAVINCI CTCity  
WILLIAMSVILLEState  
NYZip Code  
14221-2771FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BRIGHTON EGGERT PHARMACYOccupation  
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 12 2025

Transaction ID : AA16FE2E8E5C54D9DBE9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AVVENTO, LOUIS, , ,

**A.** Mailing Address 104 PARRISH POND CT ECity  
SOUTHAMPTONState  
NYZip Code  
11968-3238FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
MD

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  
02 25 2025

Transaction ID : AAD9A727E2DEC4840A1B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 25 2025

Transaction ID : A0AEB3BB7851E45E7BB0

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BACKUS, ANDREA, L., ,

**C.** Mailing Address 31 WOOD AVECity  
MEXICOState  
NYZip Code  
13114-3394FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MACSOccupation  
TEACHER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : AFFF88094F1604DBC875

Amount of Each Receipt this Period

500.00

☐ Memo Item

1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BATT, CRISTINA, , ,

**A.**

Mailing Address 32 W SPRING ST

City

ALEXANDRIA

State

VA

Zip Code

22301-2451

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HANYS

Occupation

HEALTH POLICY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AA615B85E9E264EEB92C

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : ABC983A521A1B45E5B6D

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BENZ, DOUGLAS, , ,

**C.**

Mailing Address 20 E TUPPER ST

City

BUFFALO

State

NY

Zip Code

14203-1302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW BUFFALO INSURANCE AGENCY

Occupation

BROKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

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

Transaction ID : AA9C6FAC415E14807B2D

Amount of Each Receipt this Period

1000.00

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

1500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BOBICK, MICHAEL, J., ,

**A.**

Mailing Address 460 RIVERVIEW DR

City

YOUNGSTOWN

State

NY

Zip Code

14174-1388

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NIAGARA CUSTOM PLATING

Occupation

MANAGER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025

Transaction ID : AE0AB7FD7CCB044B2B79

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BONFIGLIO, RUSSELL, J., ,

**B.**

Mailing Address 212 HALL AVE

City

JAMESTOWN

State

NY

Zip Code

14701-6237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025

Transaction ID : A3F6E606C417E428680A

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BOYD, DONALD, , ,

**C.**

Mailing Address 65 ROLLINGWOOD ST

City

BUFFALO

State

NY

Zip Code

14221-1833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KALEIDA HEALTH

Occupation

PRESIDENT CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 17 / 2025

Transaction ID : ABD5B3358849D4621ACB

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1100.00

**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)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
03 17 2025

Transaction ID : A6361954BD71E45CA85A

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BRITZZALARO, BRIAN, , ,

**B.**

Mailing Address 264 MILLER ST

City

LANCASTER

State

NY

Zip Code

14043-4510

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

ERIE COUNTY SHERIFF'S OFFICE

DEPUTY

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : A5EAA60A6BCA54F1CA02

Amount of Each Receipt this Period

99.00



Memo Item

Full Name (Last, First, Middle Initial)

BUKI, CHRISTOPHER, , ,

**C.**

Mailing Address 531 SOUTH SAINT ASAPH STREET

City

ALEXANDRIA

State

VA

Zip Code

22314-4116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

S-3 GROUP

PRINCIPAL

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : A17F4C10D329744CF91E

Amount of Each Receipt this Period

500.00



Memo Item

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

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

599.00

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 11 OF 177	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial) CARD, BRAD, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2025	
Mailing Address 15356 FIDDLESTICKS BLVD			Transaction ID : A321B33760107421E9EA	
City FORT MYERS	State FL	Zip Code 33912-3925	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer CHARTWELL STRATEGY GROUP		Occupation LOBBYIST		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) CHEN, JAMES, , ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 19 / 2025	
Mailing Address 3907 PRINCE ST UNIT 2C			Transaction ID : A5392CB463E63496AA1F	
City FLUSHING	State NY	Zip Code 11354-5321	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer COMPU21 INSTITUTE		Occupation EDUCATION		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) CHEN, ROY, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 25 / 2025	
Mailing Address 7 PHEASANT RUN			Transaction ID : AB42EAF14B5584CDD85D	
City SETAUKET	State NY	Zip Code 11733-2220	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer NYCBS		Occupation PHYSICIAN		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

FOR LINE NUMBER:  
(check only one)

X	11a		11b		11c		11d		
	12		13a		13b		14		15

LANGWORTHY FOR CONGRESS

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

PAGE 13 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A84EB1FB0CE3A4278A52

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

CIRRONE, JOSEPH, , ,

Mailing Address 22 LEDGEWOOD CIRCLE

City

EAST SETAUKET

State

NY

Zip Code

11733-1151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NYCBS

MD

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A77176E2407574B7C8EB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : ABCCA611748B54C70A5C

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

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

1000.00

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

PAGE 14 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CLANCY, JIM, , ,

**A.**

Mailing Address 726 EXCHANGE ST

FL 7

City

BUFFALO

State

NY

Zip Code

14210-1484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KALEIDA HEALTH

Occupation

SR. DIRECTOR

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 19 / 2025D D / Y Y Y Y Y  
19 / 2025Y Y Y Y Y  
2025

Transaction ID : A44A24CA50CA44DA58EF

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 19 / 2025D D / Y Y Y Y Y  
19 / 2025Y Y Y Y Y  
2025

Transaction ID : A3CC581FDE482481FA3F

Amount of Each Receipt this Period

300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

COLLURA, JAMES, MICHAEL, ,

**C.**

Mailing Address 5555 CARDINAL PL

APT 269

City

ALEXANDRIA

State

VA

Zip Code

22304-5117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NATIONAL ENERGY &amp; FUELS INSTITUTE

Occupation

ACTING PRESIDENT/CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 13 / 2025D D / Y Y Y Y Y  
13 / 2025Y Y Y Y Y  
2025

Transaction ID : ABC44A8CAD4B04143AB0

Amount of Each Receipt this Period

250.00

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

550.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CROSS, KEVIN, J., ,

**A.**

Mailing Address 303 RUSKIN RD

City

AMHERST

State

NY

Zip Code

14226-4238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIPPES MATHIAS LLP

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : A507915D4485A476DBCE

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CUTLER, PETER, , ,

**B.**

Mailing Address 1342 AMHERST ST

City

BUFFALO

State

NY

Zip Code

14216-3402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ECMC

Occupation

SR. VP

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 18 2025

Transaction ID : AA115A8A4B767462A9B1

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
03 18 2025

Transaction ID : A8F546A67AE09476BB36

Amount of Each Receipt this Period

300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1050.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DACOSTA, NOSHIR, , ,

**A.**

Mailing Address 235 N BELLE MEAD AVE

City

EAST SETAUKET

State

NY

Zip Code

11733-3538

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

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  
02 / 26 / 2025D D / Y Y Y Y Y  
26 / 2025Y Y Y Y Y  
2025

Transaction ID : AC23B79655E844603BD5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025D D / Y Y Y Y Y  
26 / 2025Y Y Y Y Y  
2025

Transaction ID : A3E2F1DE59FE54E8D9EC

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

DANG, DANNY, , ,

**C.**

Mailing Address 687 9TH AVE

City

NEW YORK

State

NY

Zip Code

10036-3630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ESCO DRUG CO INC

Occupation

PHARMACIST

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 09 / 2025D D / Y Y Y Y Y  
09 / 2025Y Y Y Y Y  
2025

Transaction ID : A88F90F1CE95446A3B8D

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

**Transaction ID : A46197D971E79426D850**

Amount of Each Receipt this Period

**500.00**☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
**DELMONTE, BRENT, , ,**

Mailing Address 2901 28TH ST NW

City  
**WASHINGTON**State  
**DC**Zip Code  
**20008-3414**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

BGR

PRINCIPAL

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

Date of Receipt

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

**Transaction ID : A4DCC42AA8D3047A7A0C**

Amount of Each Receipt this Period

**250.00**☐ Memo ItemFull Name (Last, First, Middle Initial)  
**DOBMEIER, LINDA, A., ,**

Mailing Address 65 BRIARHILL RD

City  
**BUFFALO**State  
**NY**Zip Code  
**14221-1808**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

DOBMEIER JANITOR SUPPLY, INC.

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

Date of Receipt

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

**Transaction ID : ACB869AE140264C0499F**

Amount of Each Receipt this Period

**500.00**☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**750.00****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 PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DONALD SPOTH FARM

**A.** Mailing Address 2715 TONAWANDA CREEK RDCity  
AMHERSTState  
NYZip Code  
14228-1430FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		12		2025

Transaction ID : AF522DF46258848F6B8F

Amount of Each Receipt this Period

1500.00

☐ Memo Item

SEE PARTNER ATTRIBUTION

Full Name (Last, First, Middle Initial)

SPOTH, DONALD, , ,

**B.** Mailing Address 2715 TONAWANDA CREEK RDCity  
AMHERSTState  
NYZip Code  
14228-1430FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

DONALD SPOTH FARM

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		12		2025

Transaction ID : AECF5BA5D676148C9876

Amount of Each Receipt this Period

1500.00

☒ Memo Item

PARTNERSHIP: DONALD SPOTH FARM

Full Name (Last, First, Middle Initial)

DONALD SPOTH FARM

**C.** Mailing Address 2715 TONAWANDA CREEK RDCity  
AMHERSTState  
NYZip Code  
14228-1430FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		12		2025

Transaction ID : A0BB02C808AF5488E90F

Amount of Each Receipt this Period

500.00

☐ Memo Item

SEE PARTNER ATTRIBUTION

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

2000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SPOTH, DONALD, , ,

**A.**

Mailing Address 2715 TONAWANDA CREEK RD

City

AMHERST

State

NY

Zip Code

14228-1430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DONALD SPOTH FARM

Occupation

OWNER

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 12 / 2025D D / Y Y Y Y Y  
12 / 2025Y Y Y Y Y  
2025

Transaction ID : AFD30F4CB794F44AFA59

Amount of Each Receipt this Period

500.00

☒ Memo Item

PARTNERSHIP: DONALD SPOTH FARM

**B.**

Full Name (Last, First, Middle Initial)

DUNNE, JULIE, , ,

Mailing Address 1526 17TH STREET NW  
404

City

WASHINGTON

State

DC

Zip Code

20036-6216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MONUMENT ADVOCACY

Occupation

LAWYER/ LOBBYIST

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 12 / 2025D D / Y Y Y Y Y  
12 / 2025Y Y Y Y Y  
2025

Transaction ID : AF113C0979AA141C78A7

Amount of Each Receipt this Period

250.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

EAGLE, DAVID, , ,

Mailing Address 19017 PENINSULA POINT DRIVE

City

CORNELIUS

State

NC

Zip Code

28031-7601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025D D / Y Y Y Y Y  
25 / 2025Y Y Y Y Y  
2025

Transaction ID : A321B7AA3A56A4201A14

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1250.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED****A.** Mailing Address PO BOX 9891City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

Transaction ID : **AEFCBA790CC5E42B495E**

Amount of Each Receipt this Period

**1000.00**☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)  
**EDATTEL, PAUL, , ,**

Mailing Address 2625 MARCEY RD

City  
**ARLINGTON**State  
**VA**Zip Code  
**22207-5231**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

TODD STRATEGY GROUP

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**3300.00**

Date of Receipt

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

Transaction ID : **A37EBE07331274D0F98B**

Amount of Each Receipt this Period

**3300.00**☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**ELRAFEI, TAREK, , ,**

Mailing Address 2330 EASTCHESTER ROAD

City  
**BRONX**State  
**NY**Zip Code  
**10469-5930**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

NYCBS

ONCOLOGIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

Date of Receipt

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

Transaction ID : **A601C43D9D1BF4690973**

Amount of Each Receipt this Period

**1000.00**☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4	3	0	0	.	0	0

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

PAGE 21 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED****A.** Mailing Address PO BOX 9891City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

**Transaction ID : A626D9F00CDEE4039B48**

Amount of Each Receipt this Period

**1000.00**☒ Memo Item**INTERMEDIARY****TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.****B.** Full Name (Last, First, Middle Initial)  
**ESLINGER, JENNIFER, , ,**

Mailing Address 80 RAMSEY PARK

City  
**ROCHESTER**State  
**NY**Zip Code  
**14610-1333**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**ROCHESTER REGIONAL HEALTH****PRESIDENT**

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

Date of Receipt

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

**Transaction ID : A40E36E40D31945F3A7E**

Amount of Each Receipt this Period

**500.00**☐ Memo Item**EARMARKED (NON-DIRECTED) THROUGH WINRED****C.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

**Transaction ID : AEB6BE2F5029B461C80D**

Amount of Each Receipt this Period

**500.00**☒ Memo Item**INTERMEDIARY****TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.****500.00****SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FILLOS, TRIANTAFILLOS, , ,

**A.** Mailing Address 16715 POWELLS COVE BLVD

City

WHITESTONE

State

NY

Zip Code

11357-1527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

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  
02 / 25 / 2025D D / Y Y Y Y Y  
25 / 2025Y Y Y Y Y  
2025

Transaction ID : A5E6A92FA67AB42F4B25

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025D D / Y Y Y Y Y  
25 / 2025Y Y Y Y Y  
2025

Transaction ID : A09A2CF57596240A0A1A

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

FITZPATRICK, ANN, MARIE, ,

**C.** Mailing Address 6695 POVERTY HILL RD

City

ELLCOTTVILLE

State

NY

Zip Code

14731-9752

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THREE CATHOLIC SISTERS

Occupation

COORDINATOR OF RELIGIOUS ED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2025D D / Y Y Y Y Y  
21 / 2025Y Y Y Y Y  
2025

Transaction ID : A33FF59A88E9E40ABBFD

Amount of Each Receipt this Period

500.00

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

1500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FITZPATRICK, GREGORY, J., ,

**A.**

Mailing Address 6695 POVERTY HILL RD

City

ELLICOTTVILLE

State

NY

Zip Code

14731-9752

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FITZPATRICK AND WELLER INC

Occupation

PRESIDENT/OWNER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2025

Transaction ID : A9A5649240BBB43BF9B8

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

FORD, KATHLEEN, BROOKFIELD, ,

Mailing Address 3827 EISENHOWER AVE

City

ALEXANDRIA

State

VA

Zip Code

22304-6427

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AARP

Occupation

FEDERAL STRATEGY DIRECTOR

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ADEFF54AFB0B84A75A82

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

FREY, LAURIE, A., ,

Mailing Address 5329 GREEN VALLEY DR

City

CLARENCE

State

NY

Zip Code

14031-1232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FREY ELECTRIC CONSTRUCTION CO.

Occupation

MARKETING DIRECTOR

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025

Transaction ID : AB0D47725FF3B486697A

Amount of Each Receipt this Period

1000.00

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

2500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GAULIN, JEAN, G., ,

**A.** Mailing Address 119 NORTH DR

City

BUFFALO

State

NY

Zip Code

14216-2032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
CPA CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A5D472A5C2FEB491B9BE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GENTILE, BRADLEY, , ,

**B.** Mailing Address 1500 D ST SE

City

WASHINGTON

State

DC

Zip Code

20003-2438

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL EAST GROUP, LLCOccupation  
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AB2F36FBA510E435F926

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GEORGE, JERRY, , ,

**C.** Mailing Address g HANCOCK COURT

City

SOUTH SETAUKET

State

NY

Zip Code

11720-4610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A8A9C63604C2C4D0B925

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

2500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : AE9CCDBB5B0F947EFB16

Amount of Each Receipt this Period

1000.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

GIROUX, STEPHEN, L., ,

Mailing Address 9034 RIDGE RD

City

GASPORT

State

NY

Zip Code

14067-9408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MIDDLEPORT FAMILY HEALTH CTR

Occupation

PHARMACIST

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID : A1C4899E484CC44CAACA

Amount of Each Receipt this Period

1000.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

GIROUX, STEPHEN, L., ,

Mailing Address 9034 RIDGE RD

City

GASPORT

State

NY

Zip Code

14067-9408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MIDDLEPORT FAMILY HEALTH CTR

Occupation

PHARMACIST

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1199.00

Date of Receipt

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

Transaction ID : A38B78D6A782B493DB2E

Amount of Each Receipt this Period

99.00



Memo Item

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

1099.00

**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)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GRAUSE, MARIE, , ,

**A.**

Mailing Address 211 VAN WIES POINT RD

City

GLENMONT

State

NY

Zip Code

12077-4223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HANYS

Occupation

ADMINISTRATION

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 13 2025

Transaction ID : AAB3F76CD3CFF44F697B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 13 2025

Transaction ID : A423B2BE90AFE412C99B

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

GREENWOOD, ROBERT, J., ,

**C.**

Mailing Address 1875 WESTCHESTER RD

City

WATERLOO

State

IA

Zip Code

50701-4513

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GREENWOOD DRUG INC.

Occupation

PHARMACIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 12 2025

Transaction ID : AB9836A8A3855467EBE6

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

1250.00

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

SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 27 OF 177	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial) GRENAUER, ELLIE, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 18 / 2025	
Mailing Address 19 SOUTH ELLICOTT			Transaction ID : AF1B86E8DFFB049309F9	
City WILLIAMSVILLE	State NY	Zip Code 14221-6939	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer GLEN PARK TAVERN		Occupation RESTAURANT OWNER		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) GRENAUER, ELLIE, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 25 / 2025	
Mailing Address 19 SOUTH ELLICOTT			Transaction ID : A6C442B5C3D6E42049C8	
City WILLIAMSVILLE	State NY	Zip Code 14221-6939	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer GLEN PARK TAVERN		Occupation RESTAURANT OWNER		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) GRUENSTEIN, STEVEN, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 26 / 2025	
Mailing Address 40 VERDUN AVE			Transaction ID : AE32334DD5293407A9AB	
City NEW ROCHELLE	State NY	Zip Code 10804-2215	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer NYCBS		Occupation MD		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
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 PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025D D / Y Y Y Y Y  
26 / 2025Y Y Y Y Y  
2025

Transaction ID : AEC98193C267A47C894F

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

GUIGOVA, ADRIANA, , ,

Mailing Address 7 PHEASANT RUN

City

SETAUKET

State

NY

Zip Code

11733-2220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NYCBS

PHYSICIAN

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  
02 / 25 / 2025D D / Y Y Y Y Y  
25 / 2025Y Y Y Y Y  
2025

Transaction ID : AA5AFF795A2F8405682F

Amount of Each Receipt this Period

1000.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025D D / Y Y Y Y Y  
25 / 2025Y Y Y Y Y  
2025

Transaction ID : AE54BFBADA3234410AF9

Amount of Each Receipt this Period

1000.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00

SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 177	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial) HACK, GEOFFREY, W., ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2025	
Mailing Address 264 CAPITOL HEIGHTS			Transaction ID : A776BA3A2893A4747866	
City HOLLAND	State NY	Zip Code 14080-9611	Amount of Each Receipt this Period 99.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer HOLLAND CENTRAL SCHOOL		Occupation TEACHER		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 204.00		

Full Name (Last, First, Middle Initial) HARRIS, JOSHUA, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 25 / 2025	
Mailing Address 107 WYATT RD			Transaction ID : A5200E46647224248B8D	
City GARDEN CITY	State NY	Zip Code 11530-3117	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer NYCBS		Occupation PHYSICIAN		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 02 / 25 / 2025	
Mailing Address PO BOX 9891			Transaction ID : A8BCA862B85934B589C2	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 57211.88		

SUBTOTAL of Receipts This Page (optional).....▶	1099.00
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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HAUSRATH, CHRISTINE, A., ,

**A.**

Mailing Address 451 MEYER RD

City

BUFFALO

State

NY

Zip Code

14226-1031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAUSRATH'S LANDSCAPE

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2025

Transaction ID : A1C0BD181D752447FB11

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HEALY, DWIGHT, M., ,

**B.**

Mailing Address PO BOX 23

City

BELMONT

State

NY

Zip Code

14813-0023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

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

Transaction ID : AE319899763FA402ABAA

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HELMS, JAMES, , ,

**C.**

Mailing Address 175 E PEARL ST

City

WELLSVILLE

State

NY

Zip Code

14895-1138

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JONES MEMORIAL HOSPITAL

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2025

Transaction ID : A5DC415C33CB948E3BF5

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1400.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A881F51E59C1E40A9BD3

Amount of Each Receipt this Period

300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

HENLEY, NICHOLAS, , ,

Mailing Address 14 BLUESTONE RDG

City

HALFMOON

State

NY

Zip Code

12065-2626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

HANYS

HEALTHCARE

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : AC47EFA122106445B998

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A9D35A6A99E3546119E2

Amount of Each Receipt this Period

300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

300.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOFFMAN, DONALD, L., ,

**A.**

Mailing Address 17 WOODSHIRE S

City

GETZVILLE

State

NY

Zip Code

14068-1237

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AIRPORT PLAZA JEWELERS

Occupation

JEWELER

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	3		2	4		2	0	5	

Transaction ID : A6153F3D9B701486C86B

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HORRIGAN, HADLEY, , ,

**B.**

Mailing Address 152 SAINT JAMES PL

City

BUFFALO

State

NY

Zip Code

14222-1456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CATHOLIC HEALTH

Occupation

VP GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A1D43877E0A0E4318A84

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A34C43497C65145EB86C

Amount of Each Receipt this Period

300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

2800.00

**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)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HUFF, ALAN, M., , SR.

**A.**

Mailing Address 224 W MAPLEMERE RD

City

BUFFALO

State

NY

Zip Code

14221-3156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

A & L MOVING

Occupation

OWNER

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 12 2025

Transaction ID : A5CFDC8012A5C4AD18A6

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

IACOVANGELO, BERNARD, J., ,

**B.**

Mailing Address 20 AUTUMN WOOD

City

ROCHESTER

State

NY

Zip Code

14624-5316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FABER HOMES

Occupation

CEO

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : A98C0DA3E95304B5FAE2

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

IRELAND, DANIEL, , ,

**C.**

Mailing Address 7567 DUBLIN RD

City

BERGEN

State

NY

Zip Code

14416-9428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROCHESTER REGIONAL HEALTH

Occupation

PRESIDENT COO

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 17 2025

Transaction ID : A25B78C7324C5480DAA0

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4100.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
03 17 2025

Transaction ID : AD9F4D5B178954F708A0

Amount of Each Receipt this Period

300.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

JABLONSKI, REGINA, , ,

Mailing Address 8 DAVIDS WAY

City

PORT JEFFERSON

State

NY

Zip Code

11777-1154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NYCBS

PHYSICIAN

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 25 2025

Transaction ID : A6149525E634345FC9E1

Amount of Each Receipt this Period

500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 25 2025

Transaction ID : A2FCAC47FA1394D4D869

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

500.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JACOBS, CHRISTOPHER, L., ,

**A.**Mailing Address 120 W TUPPER ST  
STE 200City  
BUFFALOState  
NYZip Code  
14201-2170FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A8420D7AB3A1A4E6A93A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JAVED, MUHAMMED, T., ,

**B.**

Mailing Address 623 MAIN ST #200

City  
OLEANState  
NYZip Code  
14760-1532FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEPHROLOGY SERVICESOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A26998F23EFCD4266AD8

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A779C634F65C14950802

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

1000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JIMESON, ROBERT, , ,

**A.**

Mailing Address 501 WILSON ST

City

FAIRFIELD

State

CT

Zip Code

06825-1427

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PATIENTS RISING

Occupation

EXECUTIVE DIRECTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AB4EB6642747E4D51B9A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JIN, ROBERT, , ,

**B.**

Mailing Address 58 OCEAN WATCH CT

City

FREEPORT

State

NY

Zip Code

11520-5742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BQ FINANCIAL

Occupation

KAIZEN TRAINER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

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

Transaction ID : A8E747A8EF03349B8ABA

Amount of Each Receipt this Period

280.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JOHNSON, CANDACE, , ,

**C.**

Mailing Address 195 BRANTWOOD RD

City

BUFFALO

State

NY

Zip Code

14226-4369

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RPCCC

Occupation

PRESIDENT CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	5

Transaction ID : A6B44195CFEDB4F339A7

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1580.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED****A.** Mailing Address PO BOX 9891City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	5

Transaction ID : **AD5479F1488264DA8B01**

Amount of Each Receipt this Period

**300.00**☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)  
**KARAMANOUKIAN, HRATCH, L., ,**

Mailing Address 151 JACKMAN LN

City  
**ELMA**State  
**NY**Zip Code  
**14059-9444**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

VEIN TREATMENT CENTER

PHYSICIAN

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	3		3	1		2	0	2	5

Transaction ID : **AD18E0F711D78440D99D**

Amount of Each Receipt this Period

**2500.00**☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**KARAMANOUKIAN, KAREN, M., ,**

Mailing Address 151 JACKMAN LN

City  
**ELMA**State  
**NY**Zip Code  
**14059-9444**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

ADVANCED CARDIAC SURGICAL ASSOC.

ATTORNEY

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	3		3	1		2	0	2	5

Transaction ID : **AEF635827FAA740A7ABF**

Amount of Each Receipt this Period

**2500.00**☐ Memo Item**5000.00****SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KELLEY, STEPHEN, M., ,

A. Mailing Address PO BOX 279

City

GENESEO

State

NY

Zip Code

14454-0279

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : ADECD9897AE76432891C

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KELLOGG, MATTHEW, , ,

B. Mailing Address 8503 STABLE DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22308-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RICH FEUER ANDERSONOccupation  
ATTORNEY/GOVERNMENT AFFAIRS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		26		2025

Transaction ID : AFCB57D7B641F4E919FF

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KENNEDY, JAMES, , ,

C. Mailing Address 8937 WILLYOUNGS OVERLOOK

City

CLARENCE

State

NY

Zip Code

14031-1143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RPCIOccupation  
HEALTHCARE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A57B0A2E562F5455097F

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4100.00

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)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A5BEA6072BCAE46438AA

Amount of Each Receipt this Period

300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)  
KINNEY, JONATHAN, , ,

Mailing Address 418 TWO MILE CREEK RD

City  
TONAWANDA

State  
NY

Zip Code  
14150-6610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NYSDOCCS

CORRECTION LIEUTENANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 11 2025

Transaction ID : ACFF3458488824F7C8D5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
KNOPE, BRADLEY, , ,

Mailing Address 1779 REDGATE FARMS CT

City  
ROCKVILLE

State  
MD

Zip Code  
20850-1306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

U.S. DEPT OF VETERANS AFFAIRS

VETERANS LAW JUDGE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 26 2025

Transaction ID : A51FD40D5717D46D3A22

Amount of Each Receipt this Period

6600.00

☐ Memo Item

SEE REDESIGNATION

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

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

7600.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KNOPE, BRADLEY, , ,

**A.** Mailing Address 1779 REDGATE FARMS CTCity  
ROCKVILLEState  
MDZip Code  
20850-1306FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. DEPT OF VETERANS AFFAIRSOccupation  
VETERANS LAW JUDGE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 26 2025

Transaction ID : A680C9D60C0214303B28

Amount of Each Receipt this Period

- 3100.00

☒ Memo Item

REDESIGNATION FROM

**B.** Full Name (Last, First, Middle Initial)  
KNOPE, BRADLEY, , ,  
Mailing Address 1779 REDGATE FARMS CTCity  
ROCKVILLEState  
MDZip Code  
20850-1306FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. DEPT OF VETERANS AFFAIRSOccupation  
VETERANS LAW JUDGE

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 26 2025

Transaction ID : A21C56817CF14461C960

Amount of Each Receipt this Period

3100.00

☒ Memo Item

REDESIGNATION TO

**C.** Full Name (Last, First, Middle Initial)  
KREINHEDER PROPERTIES, LLC  
Mailing Address 35 SUNSET AVECity  
LAKEWOODState  
NYZip Code  
14750-1132FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 21 2025

Transaction ID : A3577F8DF4CBB4FEAB24

Amount of Each Receipt this Period

500.00

☐ Memo Item

SEE PARTNER ATTRIBUTION

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

500.00



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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KREINHEDER, PETER, , ,

**A.**

Mailing Address 35 SUNSET AVE

City

LAKEWOOD

State

NY

Zip Code

14750-1132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ELLICOTTVILLE BREWING COMPANY

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2025D D / Y Y Y Y Y  
21 / 2025Y Y Y Y Y  
2025

Transaction ID : AA1D92C5149F4473AB9D

Amount of Each Receipt this Period

500.00



Memo Item

PARTNERSHIP: KREINHEDER PROPERTIES, LLC

Full Name (Last, First, Middle Initial)

KROG, PETER, L., ,

**B.**

Mailing Address 4 CENTRE DR

City

ORCHARD PARK

State

NY

Zip Code

14127-4117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KROG CORP

Occupation

PARTNER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2025D D / Y Y Y Y Y  
21 / 2025Y Y Y Y Y  
2025

Transaction ID : A56453E13F7A1463F993

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

LANDERS, MICHAEL, J., ,

**C.**

Mailing Address PO BOX 121

City

GASPORT

State

NY

Zip Code

14067-0121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOWELL MOTORS

Occupation

PRESIDENT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025D D / Y Y Y Y Y  
24 / 2025Y Y Y Y Y  
2025

Transaction ID : A9B340C3F5F9A4A03B0C

Amount of Each Receipt this Period

250.00



Memo Item

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

1250.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LARKINS, BLAIR, , ,

**A.**

Mailing Address 220 S FAYETTE ST

City

ALEXANDRIA

State

VA

Zip Code

22314-3520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STUMPTOWN STRATEGIES

Occupation

GOV'T AFFAIRS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A0193A77407014F05B02

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAVINE, GARY, , ,

**B.**

Mailing Address 6808 HOLLISTON CIR

City

FAYETTEVILLE

State

NY

Zip Code

13066-1700

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BOUQUET HOLSTEIN PLLC

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A3F8B1768DD8E4DA59F7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAW OFFICE OF ROBERT KING PLLC

**C.**

Mailing Address 650 CLINTON SQUARE

City

ROCHESTER

State

NY

Zip Code

14604-1717

FEC ID number of contributing  
federal political committee.

C

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  
02 14 2025

Transaction ID : A459075425E8B42E39CA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SEE PARTNER ATTRIBUTION

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

2250.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KING, ROBERT, , ,

**A.**

Mailing Address 1238 BUCKS RUN

City

WEBSTER

State

NY

Zip Code

14580-9147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAWYER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A91029D7EE6DB411FA6F

Amount of Each Receipt this Period

1000.00



Memo Item

PARTNERSHIP: LAW OFFICE OF ROBERT KING  
PLLC

Full Name (Last, First, Middle Initial)

LAWICKI, JAMES, L., ,

**B.**

Mailing Address 51 SAWGRASS CT

City

HAMBURG

State

NY

Zip Code

14075-3435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MEDTRONIC

Occupation

REGIONAL MANAGER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

249.00

Date of Receipt

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

Transaction ID : A7518B28E4FE24DE48A6

Amount of Each Receipt this Period

99.00



Memo Item

Full Name (Last, First, Middle Initial)

LAWLEY, WILLIAM, J., , JR.

**C.**

Mailing Address 361 DELAWARE AVE

City

BUFFALO

State

NY

Zip Code

14202-1622

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAWLEY INSURANCE

Occupation

PRINCIPAL

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : A54CD1D2BEA4146D6BD6

Amount of Each Receipt this Period

750.00



Memo Item

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

849.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LAWSON, JAMES, KENNETH, ,

**A.**

Mailing Address 65 NORWALK AVE

City

BUFFALO

State

NY

Zip Code

14216-2819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

389.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025

Transaction ID : A037737134F4C4D4FBD9

Amount of Each Receipt this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LEDWIN, LINDSEY, E., ,

**B.**

Mailing Address 3459 S UTAH ST

City

ARLINGTON

State

VA

Zip Code

22206-1919

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TIBER CREEK GROUP

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2025

Transaction ID : A4294C248F3AA409A992

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LIN, WENQI, , ,

**C.**Mailing Address 30 RIVERSIDE BLVD  
APT 22G

City

NEW YORK

State

NY

Zip Code

10069-0117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRIGHT STAR MANAGEMENT LLC

Occupation

MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025

Transaction ID : A49EB244081C44D75AD3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

3099.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LIN, YU, , ,

**A.**

Mailing Address 40 ORANGE DR

City

JERICO

State

NY

Zip Code

11753-1532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NY HOUFU SENIOR CENTER

Occupation

MANAGER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A0CC7BB8842E34F9FAE9

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

LITTLE, BRENDAN, H., ,

**B.**

Mailing Address 194 MORRIS AVE

City

BUFFALO

State

NY

Zip Code

14214-1612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIPPES MATHIAS LLP

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : ABE14910F5B014A97A4A

Amount of Each Receipt this Period

750.00



Memo Item

Full Name (Last, First, Middle Initial)

LOBO, PAUL, , ,

**C.**

Mailing Address 3307 CLEVELAND AVE NW

City

WASHINGTON

State

DC

Zip Code

20008-3456

FEC ID number of contributing  
federal political committee.

C

Name of Employer

POLICY INTEGRATION PARTNERS

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : A67F4787888CA41D1869

Amount of Each Receipt this Period

250.00



Memo Item

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

2000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LUDWIG, WALTER, , ,

**A.**

Mailing Address 8335 BRIDLEWOOD DR

City

EAST AMHERST

State

NY

Zip Code

14051-1546

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KENMORE MERCY HOSPITAL

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : AC84A5A436B3E4513A40

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : ACD451A139B434A47886

Amount of Each Receipt this Period

300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MACEIRA, ANTHONY, , ,

**C.**

Mailing Address 120 AVE CARLOS CHARDON

City

SAN JUAN

State

PR

Zip Code

00918-1721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MZLS

Occupation

LAWYER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : A4627F4059F634107B38

Amount of Each Receipt this Period

3300.00

☐ Memo Item

3600.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MACKINNON, JEFFREY, , ,

**A.**

Mailing Address 3753 OLIVER STREET NORTHWEST

City

WASHINGTON

State

DC

Zip Code

20015-2531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FARRAGUT PARTNERS

Occupation

LOBBYIST

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2025D D / Y Y Y Y Y  
28 / 2025Y Y Y Y Y  
2025

Transaction ID : A72FBB5D5AD7C498F86B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2025D D / Y Y Y Y Y  
28 / 2025Y Y Y Y Y  
2025

Transaction ID : AD34E618606704002BDD

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MADEJSKI, THOMAS, J., ,

**C.**

Mailing Address 3231 EAGLE HARBOR WATERPORT RD

City

ALBION

State

NY

Zip Code

14411-9130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAKE PLAINS MEDICAL

Occupation

PHYSICIAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 12 / 2025D D / Y Y Y Y Y  
12 / 2025Y Y Y Y Y  
2025

Transaction ID : AE4CAA4B1F579438995B

Amount of Each Receipt this Period

500.00

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

1500.00

**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)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MANCUSO, JOSEPH, J., ,

**A.** Mailing Address 63 ROXBURY PARK

City  
EAST AMHERST

State  
NY

Zip Code  
14051-1741

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MANCUSO MARKETING

Occupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 21 2025

Transaction ID : AE2B7C30C23F24BB0A4C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARTIN, AILIN, , ,

**B.** Mailing Address PO BOX 5

City  
WILLIAMSVILLE

State  
NY

Zip Code  
14231-0005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NRCIL

Occupation  
FAMILY NURSE PRACTITIONER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 24 2025

Transaction ID : A7765C83FD2C0411583C

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARTUCCI, VICTOR, A., ,

**C.** Mailing Address 10040 HIGHVIEW CT

City  
CLARENCE

State  
NY

Zip Code  
14031-1525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MASIELLO MARTUCCI HUGHES

Occupation  
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 19 2025

Transaction ID : A74B8D150B30243E5A62

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

2500.00



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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

Transaction ID : **A4ABB8189384F4DA6A03**

Amount of Each Receipt this Period

**1000.00**☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
**MAZZULLO, DONALD, S., ,**

Mailing Address 160 EDGEMERE DR

City  
**ROCHESTER**State  
**NY**Zip Code  
**14612-1740**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

RETIRED

RETIRED

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	2		1	4		2	0	2	5

Transaction ID : **AB3FDC7F231A4E93812**

Amount of Each Receipt this Period

**1000.00**☐ Memo ItemFull Name (Last, First, Middle Initial)  
**MCGIVERN, TIM, , ,**Mailing Address 1634 14TH ST NW  
UNIT 203City  
**WASHINGTON**State  
**DC**Zip Code  
**20009-5443**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

OGILVY GOVERNMENT RELATIONS

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

Date of Receipt

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

Transaction ID : **A0143A4D40AB94EAB9C2**

Amount of Each Receipt this Period

**500.00**☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1	5	0	0	0	0

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

PAGE 50 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

Transaction ID : **AECF8F0F86F35405AAF2**

Amount of Each Receipt this Period

**500.00**☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
**MCGRATH, BRIAN, , ,**

Mailing Address 9270 HUNT CLUB LN

City  
**CLARENCE**State  
**NY**Zip Code  
**14031-1560**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

UBMD

MD

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

Date of Receipt

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

Transaction ID : **A5C3A949138154DE498F**

Amount of Each Receipt this Period

**1000.00**☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

Transaction ID : **A0B891A103EB041DCA44**

Amount of Each Receipt this Period

**1000.00**☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**1000.00****SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MILITELLO, JOHN, S., ,

**A.**

Mailing Address 493 KENNEDY RD

City

BUFFALO

State

NY

Zip Code

14227-1039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KIMILCO

Occupation

PLUMBER

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

805.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 09 2025

Transaction ID : A3E718BBDEAF74CEDBA8

Amount of Each Receipt this Period

300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 09 2025

Transaction ID : AA4111E581F624944874

Amount of Each Receipt this Period

300.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MONTANA, STEVEN, , ,

**C.**

Mailing Address 6 TIMBER RIDGE DR

City

HUNTINGTON

State

NY

Zip Code

11743-4898

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

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  
02 25 2025

Transaction ID : A4F10865FBEC14A6F9E3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1300.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A5278EB9288E44E7D9DE

Amount of Each Receipt this Period

1000.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

MORGAN, DAVID, C., ,

Mailing Address 40 TOMMY MARKS WAY

City

WEYMOUTH

State

MA

Zip Code

02190-1114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMPASS CAPITAL

Occupation

FINANCIAL PLANNER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : ABFDF49827BB742A5869

Amount of Each Receipt this Period

250.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

MORIARTY, JEREMIAH, J., ,

Mailing Address 214 WHITE OAK DR

City

ALLEGANY

State

NY

Zip Code

14706-1130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : AB2307377F7F446638D6

Amount of Each Receipt this Period

500.00



Memo Item

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

750.00

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 53 OF 177	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 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)  
LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial) MORINELLO, ANGELO, J., ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2025	
Mailing Address 151 BUFFALO AVE APT 808			Transaction ID : A44321FEF2508471A959	
City NIAGARA FALLS	State NY	Zip Code 14303-1235	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer NYS		Occupation ASSEMBLYMAN		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) MORTIER, JEFF, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 25 / 2025	
Mailing Address 4948 ESKRIDGE TERR NW			Transaction ID : A35242749C1E845ADB94	
City WASHINGTON	State DC	Zip Code 20016-3443	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer FARRAGUT PARTNERS		Occupation CONSULTANT		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 03 / 25 / 2025	
Mailing Address PO BOX 9891			Transaction ID : A50E0AE5E165F4337B98	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 57211.88		

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
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 PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 177

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

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

NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MORTIER, NICOLE, ALEXANDER, ,

A. Mailing Address 3962 GEORGETOWN CT NW

City

WASHINGTON

State

DC

Zip Code

20007-2127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

H&amp;M STRATEGIES LLP

Occupation

GOV AFFAIRS CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : AAD8F4B4CABD348B6908

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MURRAY, NORMAN, , ,

B. Mailing Address P O BOX 466

City

EAST AMHERST

State

NY

Zip Code

14051-0466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A6690156174AA4C2F9D5

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MURRAY, THUY, , ,

C. Mailing Address P. O. BOX 466

City

EAST AMHERST

State

NY

Zip Code

14051-0466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : A45887E1E8A224CD5824

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

8100.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 177

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

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

NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NAWAZ, SHAHID, , ,

**A.**

Mailing Address 15 DAVIDS WAY

City

PORT JEFFERSON

State

NY

Zip Code

11777-1153

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

MD

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  
02 25 2025

Transaction ID : AEA0501B3887940DBA0B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 25 2025

Transaction ID : A5215E5E636DC461E8BB

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

NESSEL, ARIEL, , ,

**C.**

Mailing Address PO BOX 1128

City

ROSS

State

CA

Zip Code

94957-1128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NESSEL DEVELOPMENT

Occupation

ENTREPRENEUR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 13 2025

Transaction ID : A59C9468375F44BA8AA2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 56 OF 177	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)  
LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial) NOVOSELAC, AMORY, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 26 / 2025	
Mailing Address 340 WEAVER			Transaction ID : A3E083F20976245C08B7	
City LARCHMONT	State NY	Zip Code 10538-1718	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item EARMARKED (NON-DIRECTED) THROUGH WINRED		
Name of Employer NYCBS		Occupation PHYSICIAN		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 02 / 26 / 2025	
Mailing Address PO BOX 9891			Transaction ID : A46230010B1144D3AAC1	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item INTERMEDIARY TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.		
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 57211.88		

Full Name (Last, First, Middle Initial) O'DONNELL, JOHN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 23 / 2025	
Mailing Address 707 POTOMAC AVENUE			Transaction ID : A22ED54B430284BB7900	
City BUFFALO	State NY	Zip Code 14222-1240	Amount of Each Receipt this Period - 500.00	
FEC ID number of contributing federal political committee. C		Memo Item REDESIGNATION FROM		
Name of Employer ODA		Occupation CONSULTANT		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4000.00		

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

O'DONNELL, JOHN, , ,

**A.** Mailing Address 707 POTOMAC AVENUE

City

BUFFALO

State

NY

Zip Code

14222-1240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ODA

Occupation

CONSULTANT

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		23		2025

Transaction ID : A754E3AE3C42B4FA888E

Amount of Each Receipt this Period

500.00

☒ Memo Item

REDESIGNATION TO

Full Name (Last, First, Middle Initial)

O'DONNELL, JOHN, , ,

**B.** Mailing Address 707 POTOMAC AVENUE

City

BUFFALO

State

NY

Zip Code

14222-1240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ODA

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		23		2025

Transaction ID : AA0F3C2AC97704DCAA29

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SEE REDESIGNATION

Full Name (Last, First, Middle Initial)

WINRED

**C.** Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		23		2025

Transaction ID : AB4DB49EAA7804F6DB12

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

3500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PALERMO, SILVIO, , ,

**A.**

Mailing Address 251 ROSELAND LN

City

CANANDAIGUA

State

NY

Zip Code

14424-2356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GOVERNMENTOccupation  
LAW ENFORCEMENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AC879BB2E91AB4ED4B58

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : AB1724E0F6BA14E20B92

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

PALOMO, OSWALDO, , ,

**C.**

Mailing Address 446 STURGES RD

City

FAIRFIELD

State

CT

Zip Code

06824-2851

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHARTWELL STRATEGY GROUPOccupation  
MANAGING DIRECTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : A6AA7B6F7232341B3ACF

Amount of Each Receipt this Period

3300.00

☐ Memo Item

3800.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PANZERA, BRENDA, , ,

**A.**

Mailing Address 445 EAST 86TH STREET, APT. 7 H

City  
NEW YORKState  
NYZip Code  
10028-6433FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 25 2025

Transaction ID : A07BB3B64C5444D138C6

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 25 2025

Transaction ID : A8C77A30FD097463A8BA

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

PEREZ-BRACHE, JOSE, G., , MD

**C.**

Mailing Address 4658 WINDING WOODS LN

City  
HAMBURGState  
NYZip Code  
14075-5454FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KEYSTONE HEALTHCAREOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : A855756FD659A44D3BA5

Amount of Each Receipt this Period

250.00

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

750.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PICKERING, ELISE, , ,

**A.**

Mailing Address 3721 TAFT AVE

City

ALEXANDRIA

State

VA

Zip Code

22304-2617

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MEHLMAN CONSULTING

Occupation

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A94B57C0C2CD54A1FB11

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PITILLO, NICK, , ,

**B.**

Mailing Address PO BOX 93

City

ELLICOTTVILLE

State

NY

Zip Code

14731-0093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OGP HOSPITALITY

Occupation

BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : ADC711358D28A4D49AB6

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : AF3D5C99417E14D8A910

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

750.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

POPP, MONICA, , ,

**A.**

Mailing Address 420 S FAIRFAX ST

City

ALEXANDRIA

State

VA

Zip Code

22314-3810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MARSHALL & POPPOccupation  
CONSULTING

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A21A59CF7AF4D4B7EA04

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PURIZHANSKY, JON, , ,

**B.**

Mailing Address 25 VISCOUNT DRIVE

City

BUFFALO

State

NY

Zip Code

14221-1766

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOBLIOOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 21 2025

Transaction ID : A8528EC8F469F400FA1C

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PURIZHANSKY, KIRA, , ,

**C.**

Mailing Address 25 VISCOUNT DR

City

BUFFALO

State

NY

Zip Code

14221-1766

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 21 2025

Transaction ID : A5F0A513EF29C4B39A9F

Amount of Each Receipt this Period

500.00

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

1250.00

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 62 OF 177	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial) QIAN, XINYI, , ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 19 / 2025	
Mailing Address 845 UNITED NATIONS PLZ 58 E			Transaction ID : A6E3E0A79683344B0AEC	
City NEW YORK	State NY	Zip Code 10017-3540	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer NEW EMPIRE CORP		Occupation REAL ESTATE DEVELOPMENT		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) QUATROCHE, THOMAS, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2025	
Mailing Address 20 LONGLEAT DR			Transaction ID : A9CC4AA07334044D0B59	
City BUFFALO	State NY	Zip Code 14226-4112	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer ECMC		Occupation CEO		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2025	
Mailing Address PO BOX 9891			Transaction ID : A59096B76A589483D85E	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 57211.88		

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
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 PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

QUINLAN, JOHN, , ,

**A.** Mailing Address 1 CLEARWATER STCity  
WAYLANDState  
NYZip Code  
14572-1009FEC ID number of contributing  
federal political committee.

C

Name of Employer  
QUINLAN PHARMACY & MEDICAL EQUIPMEOccupation  
PRESIDENT

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  
02 24 2025

Transaction ID : AE91D3C1D342F4BC8B72

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REDL, DAVID, , ,

**B.** Mailing Address 1511 SMITH STREETCity  
MCLEANState  
VAZip Code  
22101-3145FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SALT POINT STRATEGIESOccupation  
LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A5BDDDDDB7D4884789BC5

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RHYNE, CURTIS, , ,

**C.** Mailing Address 916 DRESDEN CTCity  
ALEXANDRIAState  
VAZip Code  
22308-2030FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALNYLAMOccupation  
DIRECTOR OF GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 26 2025

Transaction ID : A17AEBDC5609F4DE48C6

Amount of Each Receipt this Period

250.00

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

1500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RITTLING, AMY, HABIB, ,

**A.**

Mailing Address 827 LEBRUN RD

City

AMHERST

State

NY

Zip Code

14226-4206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIPPES MATHIAS LLP

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : A7C995D7ABE72405E893

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROTH, ROBERT, N., ,

**B.**

Mailing Address 182 N MAIN ST

City

HOLLAND

State

NY

Zip Code

14080-9718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROTH'S HILLSIDE TREES

Occupation

FARMER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : A5655F8022405405D861

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SBAR HOLDINGS LLC

**C.**

Mailing Address 11 WANDERING TRAIL

City

PITTSFORD

State

NY

Zip Code

14534-4159

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AC139BF6FF43E4330B46

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SEE PARTNER ATTRIBUTION

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JOHANSSON, ANDREAS, , ,

**A.** Mailing Address 11 WANDERING TRAILCity  
PITTSFORDState  
NYZip Code  
14534-4159FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE INVESTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
03		13		2025	

Transaction ID : A467468F962DA4D6D87B

Amount of Each Receipt this Period

3500.00

☒ Memo Item

PARTNERSHIP: SBAR HOLDINGS LLC

**B.** Full Name (Last, First, Middle Initial)  
SBAR HOLDINGS LLC  
Mailing Address 11 WANDERING TRAILCity  
PITTSFORDState  
NYZip Code  
14534-4159FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
03		13		2025	

Transaction ID : ABF598AABAE014EFBB47

Amount of Each Receipt this Period

1500.00

☐ Memo Item

SEE PARTNER ATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JOHANSSON, ANDREAS, , ,  
Mailing Address 11 WANDERING TRAILCity  
PITTSFORDState  
NYZip Code  
14534-4159FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE INVESTOR

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
03		13		2025	

Transaction ID : AB017FE1AE69B4EF694C

Amount of Each Receipt this Period

1500.00

☒ Memo Item

PARTNERSHIP: SBAR HOLDINGS LLC

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

1500.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHOETZ, KEN, , ,

**A.**

Mailing Address 187 MAIN ST

City

HAMBURG

State

NY

Zip Code

14075-4928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAWCNY

Occupation

VP

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A43925AD1B17E45948A2

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A479997B65BEA4D11BD0

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

SHARMA, DEEPALI, , ,

**C.**

Mailing Address 94 STILLWELL LN

City

WOODBURY

State

NY

Zip Code

11797-1023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A427AE29A028D443CA6B

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

750.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A7135E23F8A774310838

Amount of Each Receipt this Period

250.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

SHEEHY, SAMUEL, , ,

Mailing Address 11119 SISSON HWY

City

NORTH COLLINS

State

NY

Zip Code

14111-9731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

WINERY OF ELLICOTTVILLE

OWNER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AC69FB71C61804AC1B3A

Amount of Each Receipt this Period

500.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

SHUM, HELEN, , ,

Mailing Address 4559 194TH ST

City

FLUSHING

State

NY

Zip Code

11358-3533

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NYCBS

PHYSICIAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A02B73C25524D4D9CB72

Amount of Each Receipt this Period

1000.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED****A.** Mailing Address PO BOX 9891City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

Transaction ID : **A94E91920A72542D4A22**

Amount of Each Receipt this Period

**1000.00**☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)  
**SMEALLIE, SHAWN, , ,**

Mailing Address 1310 BISHOP LANE

City  
**ALEXANDRIA**State  
**VA**Zip Code  
**22302-3401**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

ACG ADVOCACY

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**500.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

Transaction ID : **A2FCC14C267FD41069EA**

Amount of Each Receipt this Period

**500.00**☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**SMEALLIE, SHAWN, , ,**

Mailing Address 1310 BISHOP LANE

City  
**ALEXANDRIA**State  
**VA**Zip Code  
**22302-3401**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

ACG ADVOCACY

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

Date of Receipt

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

Transaction ID : **A172F009D6177477F93B**

Amount of Each Receipt this Period

**500.00**☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶**1000.00**

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SONG, KENT, M., ,

**A.**

Mailing Address 38-61 233RD ST

City

DOUGLASTON

State

NY

Zip Code

11363-1553

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRIGHT STAR GROUP

Occupation

OWNER

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

Transaction ID : AE3648EFB5891434F9D8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STAIANO, YELDA, , ,

**B.**

Mailing Address 543 HUNTER LN

City

OYSTER BAY

State

NY

Zip Code

11771-4603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

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  
02 / 26 / 2025D D / Y Y Y Y Y  
26 / 2025Y Y Y Y Y  
2025

Transaction ID : AC12844226344411D995

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025D D / Y Y Y Y Y  
26 / 2025Y Y Y Y Y  
2025

Transaction ID : AD6D0DC00B70B4596AEE

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

3500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STAMBACH, MARK, R., ,

**A.** Mailing Address 23 BROMPTON CIRCity  
WILLIAMSVILLEState  
NYZip Code  
14221-5917FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMHERST INVESTIGATIONS INC.Occupation  
PRIVATE INVESTIGATOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2025

Transaction ID : A2E9A4BB6BFC9475C853

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STAPLETON, DAVID, M., ,

**B.** Mailing Address PO BOX 945City  
HAMBURGState  
NYZip Code  
14075-0945FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAVID HOMESOccupation  
BUILDER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2025

Transaction ID : A4EF2F352B62148148C5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2025

Transaction ID : A31D416DDDB354EDAA40

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

1250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STASZEWSKI, HARRY, , ,

**A.** Mailing Address 29 CRESCENT LANECity  
ROSLYN HEIGHTSState  
NYZip Code  
11577-1529FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 25 2025

Transaction ID : AF6161903C0B54711B58

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 25 2025

Transaction ID : A0916BBC37BB040088B9

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

STEINBERG, FRANKLYN, , ,

**C.** Mailing Address 3502 SHEPHERD STREETCity  
CHEVY CHASEState  
MDZip Code  
20815-3222FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORBES TATE PARTNERSOccupation  
GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 30 2025

Transaction ID : A00A9B4D65BFF4F67BA6

Amount of Each Receipt this Period

250.00

☐ Memo Item

750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STEPHEN, JAMES, J., ,

**A.** Mailing Address 7171 PENDALE CIRCity  
NORTH TONAWANDAState  
NYZip Code  
14120-9714FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STEPHEN DEVELOPMENTOccupation  
CO-OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AAB4251E036C84418976

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STEPHEN, PAUL, S., , SR.

**B.** Mailing Address 9812 MAIN STCity  
CLARENCEState  
NYZip Code  
14031-2042FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
DEVELOPER

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  
02 / 14 / 2025

Transaction ID : A0EE085E53C3141778BA

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STEPHEN, PAUL, S., , SR.

**C.** Mailing Address 9812 MAIN STCity  
CLARENCEState  
NYZip Code  
14031-2042FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
DEVELOPER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 12 / 2025

Transaction ID : A3978CCB1A690437CB6F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

4000.00

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



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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STRAWN, HEATHER, L., ,

**A.** Mailing Address 4833 1ST ST SCity  
ARLINGTONState  
VAZip Code  
22204-1315FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LUNDBECKOccupation  
GOVT AFFAIRS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2025

Transaction ID : A65B22B8D12BA410D97B

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SULLIVAN, FRANCINE, L., ,

**B.** Mailing Address 202 LINCOLN BLVDCity  
KENMOREState  
NYZip Code  
14217-2350FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 18 / 2025

Transaction ID : A717B202E46F24F989B2

Amount of Each Receipt this Period

99.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SUN, CHLOE, B., ,

**C.** Mailing Address 200 E 57TH ST  
APT 10HCity  
NEW YORKState  
NYZip Code  
10022-2866FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BUCKMANOccupation  
INVESTMENT BANKER

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  
02 / 14 / 2025

Transaction ID : AA7DD642F3BD1430CAB4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1349.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SURACE, ROCCO, , ,

**A.**

Mailing Address 6384 OCONNOR DR

City

LOCKPORT

State

NY

Zip Code

14094-6529

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

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

Transaction ID : ABA1A9C3257E44D9E866

Amount of Each Receipt this Period

50.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A69D728D0C4A34251AA0

Amount of Each Receipt this Period

50.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

SURACE, ROCCO, , ,

**C.**

Mailing Address 6384 OCONNOR DR

City

LOCKPORT

State

NY

Zip Code

14094-6529

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

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

Transaction ID : A5230FC1F4D8643AB8A9

Amount of Each Receipt this Period

500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

550.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A237BABE6EAB14940A3A

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

SYALI, GURMOHAN, , ,

Mailing Address 129 BREELEY BLVD

City

MELVILLE

State

NY

Zip Code

11747-5332

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NYCBS

PHYSICIAN

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AFB342EB6217C4EB6A55

Amount of Each Receipt this Period

1000.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A8AFE576C314B4369805

Amount of Each Receipt this Period

1000.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

1000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SY, THOMAS, , ,

**A.**

Mailing Address 7111 NORTHEdge DR

City  
LOCKPORTState  
NYZip Code  
14094-1633FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOWN OF LOCKPORTOccupation  
ECONOMIC DEVELOPMENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A6D801326697A4FFC901

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TEMME, ALANNA, , ,

**B.**

Mailing Address 2231 48TH STREET NORTHWEST

City  
WASHINGTONState  
DCZip Code  
20007-1036FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LMH STRATEGIC SOLUTIONS, LLCOccupation  
FOUNDER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A0BC68FDE51354C4AABB

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THOMPSON, JAMES, , ,

**C.**

Mailing Address 13 KINGS CT

City  
CLIFTON PARKState  
NYZip Code  
12065-5291FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JA SOLUTIONS, LLCOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 26 2025

Transaction ID : A866F93EEC342464BBD1

Amount of Each Receipt this Period

500.00

☐ Memo Item

4250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TOLLE, THERESA, , ,

**A.**

Mailing Address 5797 TREASURE LN

City  
GRANTState  
FLZip Code  
32949-8203FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BAY STREET PHARMACYOccupation  
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AE523F064D36E4A079DD

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : AC87DB0E32D2E4C07896

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

TORRES, ALFREDO, , ,

**C.**

Mailing Address 43 FIELDHOUSE AVENUE

City  
EAST SETAUKETState  
NYZip Code  
11733-1071FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
MD

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  
02 25 2025

Transaction ID : ACBDB196CF13D4215969

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1250.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED****A.** Mailing Address PO BOX 9891City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

**Transaction ID : A68EA602924EC4B69A03**

Amount of Each Receipt this Period

**1000.00**☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)  
**TORREY, MAUREEN, , ,**

Mailing Address PO BOX 366

City  
**ELBA**State  
**NY**Zip Code  
**14058-0366**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**PAUL MARSHALL PRODUCE****OWNER**

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**1000.00**

Date of Receipt

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

**Transaction ID : ABEAD2388F8354965B2E**

Amount of Each Receipt this Period

**500.00**☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**TREXLER, ALLISON, , ,**

Mailing Address 4 CEDAR STREET

City  
**ALEXANDRIA**State  
**VA**Zip Code  
**22301-2618**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**MASSIE PARTNERS****PARTNER**

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

Date of Receipt

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

**Transaction ID : A07BEB CD8814F4CE7B4B**

Amount of Each Receipt this Period

**250.00**☐ Memo Item**750.00****SUBTOTAL** of Receipts This Page (optional)..... ▶**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 79 OF 177	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial) TURNER, THOMAS, A., ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 21 / 2025	
Mailing Address 33 E LAKE ST			Transaction ID : A81BC62EE4B8B41528D1	
City LAKEWOOD	State NY	Zip Code 14750-1205	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer SELF-EMPLOYED		Occupation REAL ESTATE		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) URLAUB, CJ, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 08 / 2025	
Mailing Address 21 GREENWOOD DR			Transaction ID : A5EE4041D6E454E47B42	
City ORCHARD PARK	State NY	Zip Code 14127-3912	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer CATHOLIC HEALTH		Occupation EXECUTIVE		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 03 / 08 / 2025	
Mailing Address PO BOX 9891			Transaction ID : AC397A15AC1E147169AA	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer		Occupation		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 57211.88		

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

VACCO, DENNIS, C., ,

**A.** Mailing Address 6420 HILLCROFT DRCity  
BOSTONState  
NYZip Code  
14025-9709FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIPPES MATHIAS LLPOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2025

Transaction ID : A6785CDEAEFF84AAB8B2

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VACIRCA, JEFF, , ,

**B.** Mailing Address 1500 ROUTE 112City  
PORT JEFFERSON STAState  
NYZip Code  
11776-8054FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : AE18BD65EB1C2455BB0F

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025

Transaction ID : A1A2FB64B2A03448293E

Amount of Each Receipt this Period

1041.02

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

4541.02

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

VASILION, PETER, P., ,

**A.** Mailing Address 4620 BONCREST DR ECity  
WILLIAMSVILLEState  
NYZip Code  
14221-6347FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 24 2025

Transaction ID : A492C44B44FAA453B9AE

Amount of Each Receipt this Period

250.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)

VERTICAL PROJECTS NYC LLC

Mailing Address 645 MADISON AVE  
FL 11City  
NEW YORKState  
NYZip Code  
10022-1010FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A93E317BEC15F49299D8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SEE PARTNER ATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)

HIRSCHFELD, ELIE, , ,

Mailing Address 645 MADISON AVE  
FL 11City  
NEW YORKState  
NYZip Code  
10022-1010FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HIRSCHFELD PROPERTIESOccupation  
OWNER/DEVELOPER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A97563CF343D34979819

Amount of Each Receipt this Period

1000.00

☒ Memo Item

PARTNERSHIP: VERTICAL PROJECTS NYC LLC

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

1250.00

SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 82 OF 177	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial) WAGLE, MANOHAR, G., ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2025	
Mailing Address 115 TROY VIEW LN			Transaction ID : A13B0AD23481B4A7E924	
City WILLIAMSVILLE	State NY	Zip Code 14221-3523	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) WAGNER, EDWARD, J., ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 21 / 2025	
Mailing Address 5633 WOODRUFF DR			Transaction ID : AFFF359F8B0E041388FD	
City CLARENCE CENTER	State NY	Zip Code 14032-9288	Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer WEST HERR		Occupation FINANCE DIRECTOR		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) WASIL, TARUN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 25 / 2025	
Mailing Address 34 TURNBERRY COURT			Transaction ID : AA387D6A4BBBC4EEAB09	
City DIX HILLS	State NY	Zip Code 11746-5661	Amount of Each Receipt this Period 1041.02	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer NYCBS		Occupation PHYSICIAN		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1041.02		

SUBTOTAL of Receipts This Page (optional).....▶		3291.02
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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 25 / 2025D D / Y Y Y Y Y  
25 / 2025Y Y Y Y Y  
2025

Transaction ID : A594D86041FFF41B58DC

Amount of Each Receipt this Period

1041.02



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

WAYNE, ANDREW, W., ,

Mailing Address 19 LEGEND RD

City

BENBROOK

State

TX

Zip Code

76132-1037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SIEMENS CORPORATION

Occupation

MANAGING DIRECTOR

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2025D D / Y Y Y Y Y  
26 / 2025Y Y Y Y Y  
2025

Transaction ID : AD9143FDB6E51407FAC3

Amount of Each Receipt this Period

250.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

WEPPNER, KATHLEEN, A., ,

Mailing Address 239 MEADOWVIEW LANE

City

BUFFALO

State

NY

Zip Code

14221-3556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE PATRIOT GUARDIANS

Occupation

CO-FOUNDER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : ADEC63764C26149D6BCC

Amount of Each Receipt this Period

250.00



Memo Item

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

500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WHITE, DIRK, , ,

**A.**

Mailing Address 117 GRANITE CREEK RD

City  
SITKAState  
AKZip Code  
99835-9578FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WHITES INCOccupation  
PHARMACIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A1B5760F512424BBCB13

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : AFE43092834494F848E9

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

WIKTOR, COREY, R., ,

**C.**

Mailing Address 7206 TRICIA LN

City  
BOSTONState  
NYZip Code  
14025-9641FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CCIDAOccupation  
DIRECTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 21 2025

Transaction ID : ABCAF2FF3BA1E41DB812

Amount of Each Receipt this Period

750.00

☐ Memo Item

1250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WILLCOX, DARREN, , ,

**A.**

Mailing Address 9696 MILL RIDGE LN

City

GREAT FALLS

State

VA

Zip Code

22066-2300

FEC ID number of contributing  
federal political committee.

C

Name of Employer

W STRATEGIES

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 25 2025

Transaction ID : A40EF2CCA01D7458CB0B

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WOJTASZEK, HENRY, F., ,

**B.**

Mailing Address 620 E GOUNDRY ST

City

NORTH TONAWANDA

State

NY

Zip Code

14120-5619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 28 2025

Transaction ID : A9C8BF499CB1749E3912

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WOJTASZEK, HENRY, F., ,

**C.**

Mailing Address 620 E GOUNDRY ST

City

NORTH TONAWANDA

State

NY

Zip Code

14120-5619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 15 2025

Transaction ID : ABFE7400F20BC4A22A0D

Amount of Each Receipt this Period

- 500.00

☒ Memo Item

REDESIGNATION FROM

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

3750.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WOJTASZEK, HENRY, F., ,

**A.**

Mailing Address 620 E GOUNDRY ST

City

NORTH TONAWANDA

State

NY

Zip Code

14120-5619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : AF75A32DD05584B98B35

Amount of Each Receipt this Period

500.00

☒ Memo Item

REDESIGNATION TO

**B.**

Full Name (Last, First, Middle Initial)

WOJTASZEK, HENRY, F., ,

Mailing Address 620 E GOUNDRY ST

City

NORTH TONAWANDA

State

NY

Zip Code

14120-5619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : A1DCB7EDDB8F64A82BE3

Amount of Each Receipt this Period

750.00

☐ Memo Item

SEE REDESIGNATION

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A7F511A499B4B459AA21

Amount of Each Receipt this Period

750.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

750.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WOJTASZEK, HENRY, F., ,

**A.** Mailing Address 620 E GOUNDRY STCity  
NORTH TONAWANDAState  
NYZip Code  
14120-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4099.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 19 2025

Transaction ID : A50156A934C344FBBA8A

Amount of Each Receipt this Period

- 99.00

☒ Memo Item

REDESIGNATION FROM

**B.** Full Name (Last, First, Middle Initial)  
WOJTASZEK, HENRY, F., ,  
Mailing Address 620 E GOUNDRY STCity  
NORTH TONAWANDAState  
NYZip Code  
14120-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4099.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 19 2025

Transaction ID : A3D17E2E4A649415ABD6

Amount of Each Receipt this Period

99.00

☒ Memo Item

REDESIGNATION TO

**C.** Full Name (Last, First, Middle Initial)  
WOJTASZEK, HENRY, F., ,  
Mailing Address 620 E GOUNDRY STCity  
NORTH TONAWANDAState  
NYZip Code  
14120-5619FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4099.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 19 2025

Transaction ID : A386506C52223486EB5A

Amount of Each Receipt this Period

99.00

☐ Memo Item

SEE REDESIGNATION

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

99.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED****A.**

Mailing Address PO BOX 9891

City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

**Transaction ID : AB0323B6E07F247D7861**

Amount of Each Receipt this Period

**99.00**☒ Memo Item**INTERMEDIARY****TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**Full Name (Last, First, Middle Initial)  
**YANG, KEVIN, ,****B.**

Mailing Address 15041 11TH AVE

City  
**WHITESTONE**State  
**NY**Zip Code  
**11357-1805**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**SELF-EMPLOYED****INVESTMENTS**

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	1		1	9		2	0	2	5

**Transaction ID : A6B540D2F35BD4B32A92**

Amount of Each Receipt this Period

**1000.00**☐ Memo ItemFull Name (Last, First, Middle Initial)  
**ZAEPFEL, LAURA, A., ,****C.**

Mailing Address 4660 GREENBRIAR RD

City  
**WILLIAMSVILLE**State  
**NY**Zip Code  
**14221-6236**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

**UNILAND DEVELOPMENT****REAL ESTATE**

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**750.00**

Date of Receipt

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

**Transaction ID : A3B992634390945B69D1**

Amount of Each Receipt this Period

**250.00**☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**1250.00****TOTAL** This Period (last page this line number only)..... ►



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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ZAEPFEL, LAURA, A., ,

**A.** Mailing Address 4660 GREENBRIAR RDCity  
WILLIAMSVILLEState  
NYZip Code  
14221-6236FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNILAND DEVELOPMENTOccupation  
REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : A77C9675896C6481F896

Amount of Each Receipt this Period

3500.00

☐ Memo Item

SEE REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
ZAEPFEL, LAURA, A., ,  
Mailing Address 4660 GREENBRIAR RDCity  
WILLIAMSVILLEState  
NYZip Code  
14221-6236FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNILAND DEVELOPMENTOccupation  
REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : AB8C795A29A554628A23

Amount of Each Receipt this Period

- 750.00

☒ Memo Item

REDESIGNATION FROM

**C.** Full Name (Last, First, Middle Initial)  
ZAEPFEL, LAURA, A., ,  
Mailing Address 4660 GREENBRIAR RDCity  
WILLIAMSVILLEState  
NYZip Code  
14221-6236FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNILAND DEVELOPMENTOccupation  
REAL ESTATE

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : A78162EF10CCC467F9FD

Amount of Each Receipt this Period

750.00

☒ Memo Item

REDESIGNATION TO

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

3500.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ZEPLOWITZ, BARRY, , ,

**A.** Mailing Address 144 THE VILLAGE GRNCity  
WILLIAMSVILLEState  
NYZip Code  
14221-4532FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BARRY ZEPLOWITZ & ASSOCIATESOccupation  
PARTNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : A86B8099234784F1C89A

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ZUHOSKI, ALEXANDER, , ,

**B.** Mailing Address 521 PECONIC BAY BLVDCity  
RIVERHEADState  
NYZip Code  
11901-5904FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A8809DA2130AD49FFBDE

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : AEFA9BCBCF27E40AD829

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

750.00

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

169055.04

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BOSTON REPUBLICAN COMMITTEE****A.**

Mailing Address PO BOX 142

City

NORTH BOSTON

State

NY

Zip Code

14110-0142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

198.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025

Transaction ID : A96AF91CBE65A4586ACF

Amount of Each Receipt this Period

198.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

**CLARENCE REPUBLICAN COMMITTEE****B.**

Mailing Address PO BOX 207

City

CLARENCE CENTER

State

NY

Zip Code

14032-0207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 24 / 2025

Transaction ID : AD880D8716E55477BBE9

Amount of Each Receipt this Period

100.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

**NIAGARA COUNTY REPUBLICAN COMMITTEE****C.**

Mailing Address PO BOX 1226

City

NORTH TONAWANDA

State

NY

Zip Code

14120-9226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

99.00

Date of Receipt

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

Transaction ID : A975A093F96E14E91A14

Amount of Each Receipt this Period

99.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►397.00  
397.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AES CORPORATION PAC**

Mailing Address 4300 WILSON BLVD

FL 11

City

ARLINGTON

State

VA

Zip Code

22203-4167

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

C00507962

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A5DAEC406E7724D1B8D0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 MASSACHUSETTS AVE NW

City

WASHINGTON

State

DC

Zip Code

20036-2212

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

C00035451

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A5686D9D6D11B470A826

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALLIED PILOTS ASSOCIATION PAC**

Mailing Address 14600 TRINITY BLVD

STE 500

City

FORT WORTH

State

TX

Zip Code

76155-2559

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

C00267849

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A0A968414D3CF4817B30

Amount of Each Receipt this Period

5000.00

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

11000.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN ASSOCIATION FOR HOMECARE PAC (AAHOMECARE PAC)**Mailing Address 1400 CRYSTAL DR  
STE 460City  
ARLINGTONState  
VAZip Code  
22202-4167FEC ID number of contributing  
federal political committee.**C** C00357129

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		13		2025

Transaction ID : AC47629B233F046CD9E8

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN CHEMISTRY COUNCIL PAC**

Mailing Address 700 2ND ST NE

City  
WASHINGTONState  
DCZip Code  
20002-8100FEC ID number of contributing  
federal political committee.**C** C00252338

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		28		2025

Transaction ID : A4EDFFA4F35074B6DB90

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN CHIROPRACTIC ASSOCIATION PAC**Mailing Address 1701 CLARENDON BLVD  
STE 200City  
ARLINGTONState  
VAZip Code  
22209-2700FEC ID number of contributing  
federal political committee.**C** C00102764

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A330866E663224E888C0

Amount of Each Receipt this Period

1000.00

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

2500.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC PAC)****A.**Mailing Address 1400 L ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20005-3592FEC ID number of contributing  
federal political committee.**C** C00010868

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
03		13		2025

**Transaction ID : AC07360A8317C48FC9E6**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN CRYSTAL SUGAR COMPANY PAC****B.**

Mailing Address 101 NORTH 3RD STREET

City  
MOORHEADState  
MNZip Code  
56560-1952FEC ID number of contributing  
federal political committee.**C** C00110338

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
03		13		2025

**Transaction ID : A78493877F97741B2874**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN HOSPITAL ASSOCIATION PAC****C.**Mailing Address 800 TENTH STREET, NW  
TWO CITYCENTER, SUITE 400City  
WASHINGTONState  
DCZip Code  
20001-5188FEC ID number of contributing  
federal political committee.**C** C00106146

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
03		24		2025

**Transaction ID : A112E1EEEB0024E098BF**

Amount of Each Receipt this Period

4500.00

☐ Memo Item

12000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN HOSPITAL ASSOCIATION PAC****A.**

Mailing Address 800 TENTH STREET, NW

TWO CITYCENTER, SUITE 400

City

WASHINGTON

State

DC

Zip Code

20001-5188

FEC ID number of contributing  
federal political committee.**C** C00106146

Name of Employer

Occupation

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		24		2025

Transaction ID : AA5E25E0AE9E944FD9CD

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN OPTOMETRIC ASSOCIATION PAC****B.**

Mailing Address 1505 PRINCE ST

STE 300

City

ALEXANDRIA

State

VA

Zip Code

22314-2874

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A01552566118044D4B90

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITICAL ACTION (APWU COPA)****C.**

Mailing Address 1300 L ST NW

City

WASHINGTON

State

DC

Zip Code

20005-4107

FEC ID number of contributing  
federal political committee.**C** C00010322

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ADD36494EA3A444EBA84

Amount of Each Receipt this Period

1000.00

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

8000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN SOCIETY OF INTERVENTIONAL PAIN PHYSICIANS PAC**

Mailing Address 2831 LONE OAK RD

City

PADUCAH

State

KY

Zip Code

42003-8041

FEC ID number of contributing  
federal political committee.**C** C00351197

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AA28746447C91407791E

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BLUE SHIELD OF CALIFORNIA PAC (SHIELD PAC)**

Mailing Address 601 12TH ST

City

OAKLAND

State

CA

Zip Code

94607-3885

FEC ID number of contributing  
federal political committee.**C** C00340364

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A6A8D887670B94B8992E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC**

Mailing Address 750 9TH ST NW

City

WASHINGTON

State

DC

Zip Code

20001-4524

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

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : ABC313F9906684AA086B

Amount of Each Receipt this Period

4500.00

☐ Memo Item

10500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC****A.**

Mailing Address 750 9TH ST NW

City

WASHINGTON

State

DC

Zip Code

20001-4524

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A124C1D64863840ACB57

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BOLOGNA FOR ASSEMBLY****B.**

Mailing Address PO BOX 215

City

CLARENCE CENTER

State

NY

Zip Code

14032-0215

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A6B9BE56B04BE43A1876

Amount of Each Receipt this Period

250.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

**CAMBIA HEALTH SOLUTIONS INC. PAC****C.**Mailing Address 200 SW MARKET ST  
PO BOX 1271 MS E12C

City

PORTLAND

State

OR

Zip Code

97201-5715

FEC ID number of contributing  
federal political committee.**C** C00252684

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A408209685C874A2F842

Amount of Each Receipt this Period

1000.00

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

1750.00

**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)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS

**A.**

Mailing Address 101 CONSTITUTION AVE NW  
10TH FLOOR WEST

City

WASHINGTON

State

DC

Zip Code

20001-2133

FEC ID number of contributing  
federal political committee.

C C00001016

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  
02 14 2025

Transaction ID : A5D56293889084190B8C

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B.**

Full Name (Last, First, Middle Initial)

COMCAST CORPORATION & NBCUNIVERSAL PAC - FEDERAL

Mailing Address 1701 JOHN F KENNEDY BLVD  
FL 49

City

PHILADELPHIA

State

PA

Zip Code

19103-2855

FEC ID number of contributing  
federal political committee.

C C00248716

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 28 2025

Transaction ID : AC79C30A2F6CE4ED7B2A

Amount of Each Receipt this Period

3000.00

☐ Memo Item

**C.**

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT DEBORAH CHIMES

Mailing Address 25 BURBANK DR

City

ORCHARD PARK

State

NY

Zip Code

14127-2369

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 12 2025

Transaction ID : AB1C036B59B7E44FBB34

Amount of Each Receipt this Period

250.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

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

8250.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COMMITTEE TO ELECT DEBORAH CHIMES****A.**

Mailing Address 25 BURBANK DR

City

ORCHARD PARK

State

NY

Zip Code

14127-2369

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

648.00

Date of Receipt

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

Transaction ID : AAD7E241443B047FF95C

Amount of Each Receipt this Period

198.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

**B.**

Full Name (Last, First, Middle Initial)

**CONQUERING CANCER PAC**Mailing Address 228 S WASHINGTON ST  
STE 115

City

ALEXANDRIA

State

VA

Zip Code

22314-5404

FEC ID number of contributing  
federal political committee.

C C00785014

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A25D9FEA966C1459E861

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**CORNING INCORPORATED EMPLOYEES PAC (COREPAC)**Mailing Address 1001 PENNSYLVANIA AVE NW  
STE 420

City

WASHINGTON

State

DC

Zip Code

20004-2542

FEC ID number of contributing  
federal political committee.

C C00033589

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	2		1	4		2	0	2	5

Transaction ID : A6E99E5C6377843FF99F

Amount of Each Receipt this Period

5000.00

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

10198.00
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# **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)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DEFENDING MAIN STREET SUPERPAC INC.**

**A.**

Mailing Address 411 NEW JERSEY AVE SE

City

WASHINGTON

State

DC

Zip Code

20003-4007

FEC ID number of contributing  
federal political committee.

**C** C00540203

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 17 2025

Transaction ID : AABA3BA25B37B4B2CA7F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**DELAWARE NORTH COMPANIES, INC. PAC**

**B.**

Mailing Address 250 DELAWARE AVE

City

BUFFALO

State

NY

Zip Code

14202-2014

FEC ID number of contributing  
federal political committee.

**C** C00532887

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AB85AB9C9A86042A8BC4

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)**

**C.**

Mailing Address 1001 PENNSYLVANIA AVE NW  
STE 710

City

WASHINGTON

State

DC

Zip Code

20004-2513

FEC ID number of contributing  
federal political committee.

**C** C00197228

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 13 2025

Transaction ID : AF66F91C5EA804D2CAE8

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)..... ►

4500.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ENERGY MARKETERS OF AMERICA SMALL BUSINESS COMMITTEE PAC (EMA SBC PAC)

**A.**Mailing Address 1901 FORT MYER DR  
STE 500City  
ARLINGTONState  
VAZip Code  
22209-1609FEC ID number of contributing  
federal political committee.**C** C00035204

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	2		1	4		2	0	2	5

Transaction ID : ACF4BE51F81D24C2692D

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

FGS GLOBAL (US) LLC PAC

Mailing Address 1032 15TH ST NW  
STE 247City  
WASHINGTONState  
DCZip Code  
20005-1502FEC ID number of contributing  
federal political committee.**C** C00466094

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AFDBB6DC99943411FBD8

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

FOOD SOLUTIONS ACTION PAC (FSA PAC)

Mailing Address PO BOX 34024

City  
WASHINGTONState  
DCZip Code  
20043-4024FEC ID number of contributing  
federal political committee.**C** C00789164

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : AE5B6E3C9F3B043BDB58

Amount of Each Receipt this Period

1500.00

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

3500.00

**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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FRIENDS OF ANGELA THOMPSON**

**A.**

Mailing Address PO BOX 723

City

CLIFTON PARK

State

NY

Zip Code

12065-0723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 13 2025

Transaction ID : ADB105914EF8145A5A45

Amount of Each Receipt this Period

1000.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

**FRIENDS OF CHARLES SNYDER**

**B.**

Mailing Address 459 SNYDER RD

City

EAST AURORA

State

NY

Zip Code

14052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

99.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 24 2025

Transaction ID : AAA8695AD6A0D488B9EF

Amount of Each Receipt this Period

99.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

**FRIENDS OF COMMUNITY ONCOLOGY PAC**

**C.**

Mailing Address 760 LYNNHAVEN PKWY  
STE 150

City

VIRGINIA BEACH

State

VA

Zip Code

23452-7492

FEC ID number of contributing  
federal political committee.

C

C00383976

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A9936EBFF0F8C4132917

Amount of Each Receipt this Period

5000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

6099.00

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City  
**ARLINGTON**State  
**VA**Zip Code  
**22219-1891**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**57211.88**

Date of Receipt

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

Transaction ID : **A79CD7ACA5FD44487B44**

Amount of Each Receipt this Period

**5000.00**☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
**GARCIA FOR SHERIFF**

Mailing Address 42 DEERCHASE RD

City  
**WEST SENECA**State  
**NY**Zip Code  
**14224-1244**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**250.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		13		2025

Transaction ID : **AE2C05EF718874A05B0C**

Amount of Each Receipt this Period

**1000.00**☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)  
**GOD, FAMILY, & COUNTRY PAC**

Mailing Address PO BOX 848

City  
**ARLINGTON**State  
**VA**Zip Code  
**22216-0848**FEC ID number of contributing  
federal political committee.**C C00847897**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

**2500.00**

Date of Receipt

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

Transaction ID : **AC7C64F2BD2DC4A87A26**

Amount of Each Receipt this Period

**2500.00**☐ Memo Item**3500.00****SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GUIDEWELL MUTUAL HOLDING CORPORATION PAC (GUIDEWELL PAC)**Mailing Address 4800 DEERWOOD CAMPUS PKWY  
DC1-7City  
JACKSONVILLEState  
FLZip Code  
32246-8317FEC ID number of contributing  
federal political committee.**C** C00161141

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ACEC9A0C2440E4A2EA99

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HIGHLAND ELECTRIC FLEETS, INC. PAC**Mailing Address 200 CUMMINGS CTR  
STE 273DCity  
BEVERLYState  
MAZip Code  
01915-6503FEC ID number of contributing  
federal political committee.**C** C00888727

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A9757341C601A4F2EA62

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HIGHMARK PAC OF HIGHMARK INC.**

Mailing Address 1800 CENTER ST

City  
CAMP HILLState  
PAZip Code  
17011-1741FEC ID number of contributing  
federal political committee.**C** C00302844

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
02		14		2025

Transaction ID : ACD0D62B11C5C4B508B2

Amount of Each Receipt this Period

2500.00

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

5000.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**INDEPENDENT PHARMACY COOPERATIVE PAC ('IPC PAC')****A.**

Mailing Address 1550 COLUMBUS ST

City

SUN PRAIRIE

State

WI

Zip Code

53590-3901

FEC ID number of contributing  
federal political committee.**C** C00508309

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : AFD634AF99AA74524BB7

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**INTERNATIONAL WAREHOUSE LOGISTICS ASSOCIATION (IWLA PAC)****B.**Mailing Address 2800 S RIVER RD  
STE 260

City

DES PLAINES

State

IL

Zip Code

60018-6003

FEC ID number of contributing  
federal political committee.**C** C00303032

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A4CAD755FF33C41F7A72

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**LKQ CORPORATION EMPLOYEE GOOD GOVERNMENT FUND****C.**Mailing Address 100 M ST SE  
STE 300

City

WASHINGTON

State

DC

Zip Code

20003-3543

FEC ID number of contributing  
federal political committee.**C** C00458158

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	2		1	4		2	0	2	5

Transaction ID : A07D65CF97AAD447ABBB

Amount of Each Receipt this Period

2000.00

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

4500.00

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>MAXIMUS INC PAC (MAXPAC)</b>	
Mailing Address 1600 TYSONS BLVD STE 1400	
City MCLEAN	State VA
Zip Code 22102-4893	
FEC ID number of contributing federal political committee. <b>C</b> C00343707	
Name of Employer	Occupation
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2025

Transaction ID : A24AE70DAE6D741A3A7F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial) <b>METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A - FEDERAL ONLY</b>	
Mailing Address 200 PARK AVE	
City NEW YORK	State NY
Zip Code 10166-0005	
FEC ID number of contributing federal political committee. <b>C</b> C00493551	
Name of Employer	Occupation
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2025

Transaction ID : A50A8A2A2365F4D91860

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial) <b>MIKE RANZENHOFER FOR STATE SENATE</b>	
Mailing Address 57 LORD BYRON LN	
City WILLIAMSVILLE	State NY
Zip Code 14221-1997	
FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer	Occupation
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID : A60F27130A3554DDFA92

Amount of Each Receipt this Period

1000.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MVL PAC

**A.**

Mailing Address PO BOX 87

City  
SOUTH SALEMState  
NYZip Code  
10590-0087FEC ID number of contributing  
federal political committee.**C** C00817338

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A865FE161E7C14FBE9DE

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MVP HEALTH CARE INC. FEDERAL PAC

**B.**

Mailing Address 625 STATE ST

City  
SCHENECTADYState  
NYZip Code  
12305-2111FEC ID number of contributing  
federal political committee.**C** C00431429

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A6E6D1C019C154AFA94D

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SEE REDESIGNATION

Full Name (Last, First, Middle Initial)

MVP HEALTH CARE INC. FEDERAL PAC

**C.**

Mailing Address 625 STATE ST

City  
SCHENECTADYState  
NYZip Code  
12305-2111FEC ID number of contributing  
federal political committee.**C** C00431429

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AC1BAF913319943F6B08

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

**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  
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(check only one)

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MVP HEALTH CARE INC. FEDERAL PAC

Mailing Address 625 STATE ST

City  
SCHENECTADYState  
NYZip Code  
12305-2111FEC ID number of contributing  
federal political committee.**C** C00431429

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A2AED220DCBEA4894B2E

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

**B.**

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF POSTAL SUPERVISORS PAC

Mailing Address 1727 KING ST  
STE 400City  
ALEXANDRIAState  
VAZip Code  
22314-2700FEC ID number of contributing  
federal political committee.**C** C00092957

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A3678D61CF59143FA88A

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 DAINGERFIELD RD

City  
ALEXANDRIAState  
VAZip Code  
22314-2886FEC ID number of contributing  
federal political committee.**C** C00030809

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		12		2025

Transaction ID : ADC37E205B8544C89BA8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NATIONAL EMERGENCY MEDICINE PAC (NEMPAC) / AMERICAN COLLEGE OF EMERGENCY PHYSICIANS

**A.**

Mailing Address 4950 W ROYAL LN

City  
IRVINGState  
TXZip Code  
75063-2524FEC ID number of contributing  
federal political committee.**C** C00140061

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A0A08E3E3895E42079DC

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

NATIONAL ENERGY &amp; FUELS INSTITUTE INC. GREENER HEATING FUELS PAC / NEFI GREENER HEATING FUELS PAC

Mailing Address 1629 K ST NW  
STE 300City  
WASHINGTONState  
DCZip Code  
20006-1631FEC ID number of contributing  
federal political committee.**C** C00782268

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		13		2025

Transaction ID : AEC56CDC7CAC54C98937

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

NATIONAL FUEL GAS COMPANY FEDERAL PAC

Mailing Address 6363 MAIN ST

City  
WILLIAMSVILLEState  
NYZip Code  
14221-5855FEC ID number of contributing  
federal political committee.**C** C00083758

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		13		2025

Transaction ID : AC4D2DF32CD2F47B3AF0

Amount of Each Receipt this Period

5000.00

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

7000.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL PROPANE GAS ASSOCIATION PAC**Mailing Address 1140 CONNECTICUT AVE NW  
STE 1075City  
WASHINGTONState  
DCZip Code  
20036-4017FEC ID number of contributing  
federal political committee.**C** C00079681

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A7E574A10642742AEB44

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC (NSSGA ROCKPAC)**Mailing Address 66 CANAL CENTER PLZ  
STE 300City  
ALEXANDRIAState  
VAZip Code  
22314-1576FEC ID number of contributing  
federal political committee.**C** C00089458

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A3F5910B7CA774997A3B

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NETJETS ASSOCIATION OF SHARED AIRCRAFT PILOTS PAC; NJASAP PAC**Mailing Address 2740 AIRPORT DR  
STE 330City  
COLUMBUSState  
OHZip Code  
43219-2286FEC ID number of contributing  
federal political committee.**C** C00488262

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : ADD52BB312AF241CCB2F

Amount of Each Receipt this Period

5000.00

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

15000.00

**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  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NORRIS FOR JUDGE****A.**

Mailing Address 7210 WOODHAVEN DR

City  
LOCKPORTState  
NYZip Code  
14094-6243FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 12 2025

Transaction ID : AD1989A2BB6FB493B8B0

Amount of Each Receipt this Period

500.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

**B.**

Full Name (Last, First, Middle Initial)

**NORRIS FOR JUDGE**

Mailing Address 7210 WOODHAVEN DR

City  
LOCKPORTState  
NYZip Code  
14094-6243FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

898.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : A52419B5BCB7E4599917

Amount of Each Receipt this Period

198.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

**C.**

Full Name (Last, First, Middle Initial)

**PUBLIC SERVICE ENTERPRISE GROUP INC. PAC (PEGPAC)**

Mailing Address 80 PARK PLZ

City  
NEWARKState  
NJZip Code  
07102-4109FEC ID number of contributing  
federal political committee.

C C00383489

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A1C2FC8F3515E419F862

Amount of Each Receipt this Period

5000.00

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

5698.00

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address 411 NEW JERSEY AVE SE

City

WASHINGTON

State

DC

Zip Code

20003-4007

FEC ID number of contributing  
federal political committee.**C** C00165159

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AD50D3228037C4659930

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

**WINRED**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

57211.88

Date of Receipt

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

Transaction ID : A4953A68AA11C4FEC9E6

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

**ROCHESTER HIGHER EDUCATION AND RESEARCH PAC (RHER PAC)**

Mailing Address 121 STATE ST

City

ALBANY

State

NY

Zip Code

12207-1649

FEC ID number of contributing  
federal political committee.**C** C00405340

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A810D5D79F4F9493DB00

Amount of Each Receipt this Period

3500.00

☐ 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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SHEET METAL &amp; AIR CONDITIONING CONTRACTORS' NATIONAL ASSOC., INC. PAC (SMAC PAC)

**A.**

Mailing Address PO BOX 221230

City  
CHANTILLYState  
VAZip Code  
20153-1230FEC ID number of contributing  
federal political committee.**C** C00013961

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		13		2025

Transaction ID : A6544C3F6950E4223B30

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

SIEMENS ENERGY, INC. PAC

Mailing Address 799 9TH ST NW  
STE 300City  
WASHINGTONState  
DCZip Code  
20001-5917FEC ID number of contributing  
federal political committee.**C** C00848820

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		13		2025

Transaction ID : A90D3C4026E244A5FA9E

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES PILOTS' ASSOCIATION PAC (SWAPA PAC)

Mailing Address 1450 EMPIRE CENTRAL DR  
STE 737City  
DALLASState  
TXZip Code  
75247-4081FEC ID number of contributing  
federal political committee.**C** C00360669

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AFC7818AF963449AA9A8

Amount of Each Receipt this Period

2500.00

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

10000.00

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**TENACIOUS PAC****A.**

Mailing Address PO BOX 378

City  
VICTORState  
NYZip Code  
14564-0378FEC ID number of contributing  
federal political committee.**C** C00635367

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AAD912312549A41B6887

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THOROUGHbred PAC****B.**Mailing Address 1634 I ST NW  
STE 1200City  
WASHINGTONState  
DCZip Code  
20006-4011FEC ID number of contributing  
federal political committee.**C** C00425439

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : A52E648A4B09D4F75BC5

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**TOYOTA MOTOR NORTH AMERICA, INC PAC (TOYOTA/LEXUS PAC)****C.**Mailing Address 325 7TH ST NW  
STE 1000City  
WASHINGTONState  
DCZip Code  
20004-2801FEC ID number of contributing  
federal political committee.**C** C00542365

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AE087FFB19F1F4E25A0A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

9000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VERIZON COMMUNICATIONS, INC. PAC (VERIZON PAC)****A.**

Mailing Address 1300 I ST NW

ATTN: TAYLOR CRAIG

City

WASHINGTON

State

DC

Zip Code

20005-3314

FEC ID number of contributing  
federal political committee.**C** C00186288

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	5	

**Transaction ID : A43B0DD87F7D9410A83C**

Amount of Each Receipt this Period

3000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**VGM MANAGEMENT LTD PAC (VGM PAC)**

Mailing Address 1111 W SAN MARNAN DR

City

WATERLOO

State

IA

Zip Code

50701-9007

FEC ID number of contributing  
federal political committee.**C** C00402545

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

**Transaction ID : A8F1C0DAE2AF64C29A39**

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. PAC**

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City

WASHINGTON

State

DC

Zip Code

20005-2273

FEC ID number of contributing  
federal political committee.**C** C00147173

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

**Transaction ID : A6F435DDB96784ECD884**

Amount of Each Receipt this Period

5000.00

☐ 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 RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
ZENECA INC. PAC (AZPAC)

Mailing Address C/O ZENECA INC.

1800 CONCORD PIKE, PO BOX 15437

City  
WILMINGTONState  
DEZip Code  
19850-5437FEC ID number of contributing  
federal political committee.**C** C00279455

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		28		2025

Transaction ID : AFBC3C8005E224DC0B98

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

1000.00

166995.00

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LANGWORTHY CONGRESSIONAL VICTORY COMMITTEE****A.**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120FEC ID number of contributing  
federal political committee.**C** C00832188

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

72303.40

Date of Receipt

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

Transaction ID : A6BE78D451C3849BB89C

Amount of Each Receipt this Period

39963.53

☐ Memo ItemTRANSFER OF JOINT FUNDRAISING PROCEEDS,  
SEE CONTRIBUTIONS BELOW**B.**

Full Name (Last, First, Middle Initial)

REID, PAUL, D., ,

Mailing Address 4564 THRALL RD

City  
LOCKPORTState  
NYZip Code  
14094-9784FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

REID COS.

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : A0766CAD2F9034702BF4

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**C.**

Full Name (Last, First, Middle Initial)

LANDA, JUDY, , ,

Mailing Address 182 BRIARWOOD CROSSING

City  
LAWRENCEState  
NYZip Code  
11559-2708FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A084F81AE3C1C46AAA35

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**SUBTOTAL** of Receipts This Page (optional)..... ▶

39963.53

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WILLIAMS, JEFFREY, D., ,

**A.**

Mailing Address 636 MOUNTAIN VIEW DR

City

LEWISTON

State

NY

Zip Code

14092-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 14 2024

Transaction ID : A986504ECCD924A84A86

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

GERNATT, ROSEANN, , ,

**B.**

Mailing Address 6707 WINDWARD PALMS CT

City

LAKE WALES

State

FL

Zip Code

33898-9600

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AA85AFD16BA594D41AB0

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

BRYLINSKI, JAMES, C., ,

**C.**

Mailing Address 6631 JEWETT HOLMWOOD ROAD

City

ORCHARD PARK

State

NY

Zip Code

14127-3019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US DEPT. OF HUDOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : A681BBD3C7F1B41039ED

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JEMAL, DOUGLAS, , ,

**A.**Mailing Address 655 NEW YORK AVE NW  
STE 830City  
WASHINGTONState  
DCZip Code  
20001-5795FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DOUGLAS DEVELOPMENTOccupation  
REAL ESTATE DEVELOPER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : A5B54A46DD2784380A20

Amount of Each Receipt this Period

1000.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**B.**

Full Name (Last, First, Middle Initial)

BUCHHEIT, GERALD, A., ,

Mailing Address 3275 N BENZING RD

City  
ORCHARD PARKState  
NYZip Code  
14127-1519FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOY VAULT STORAGEOccupation  
DEVELOPER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A39C288DD6F85458BAD7

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**C.**

Full Name (Last, First, Middle Initial)

FREY, KENT, , ,

Mailing Address 5329 GREEN VALLEY DR

City  
CLARENCEState  
NYZip Code  
14031-1232FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FREY ELECTRIC CONSTRUCTION CO.Occupation  
ELECTRICAL CONTRACTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : A3D5EBBFC1FEC41FD8A2

Amount of Each Receipt this Period

2500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FREY, LAURIE, A., ,

**A.**

Mailing Address 5329 GREEN VALLEY DR

City  
CLARENCEState  
NYZip Code  
14031-1232FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FREY ELECTRIC CONSTRUCTION CO.Occupation  
MARKETING DIRECTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : AD15FE10A3305452996A

Amount of Each Receipt this Period

2500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

LANDA, BENJAMIN, , ,

**B.**

Mailing Address 182 BRIARWOOD CROSSING

City  
LAWRENCEState  
NYZip Code  
11559-2708FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE PREMIER NETWORKOccupation  
EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : ACE343A583C8848DCA4C

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

DOMAGALSKI, JAMES, P., ,

**C.**

Mailing Address 75 HAWTHORNE DR

City  
ORCHARD PARKState  
NYZip Code  
14127-1958FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BARCLAY DAMON, LLPOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : A0510A6D196C04B2397C

Amount of Each Receipt this Period

3500.00

☒ Memo ItemPARTNER ATTRIBUTION FOR BARCLAY DAMON  
LLP [LANGWORTHY CONGRESSIONAL VICTORY**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BARCLAY DAMON LLP****A.**

Mailing Address 125 E JEFFERSON ST

City  
SYRACUSEState  
NYZip Code  
13202-2020FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : A66F8F241701C4F3E927

Amount of Each Receipt this Period

3500.00

☒ Memo ItemPARTNERSHIP CONTRIBUTION, SEE ATTRIBUTION  
BELOW. [LANGWORTHY CONGRESSIONAL

Full Name (Last, First, Middle Initial)

**GALANIS, TERRY, S., , JR.****B.**

Mailing Address 11370 SUEMARTOM CT

City  
MARILLAState  
NYZip Code  
14102-9707FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SEALING DEVICES, INC.

EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : AC6DCFEF7A31F45429FC

Amount of Each Receipt this Period

3250.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

**SMITH, GLENN, , ,****C.**

Mailing Address 7355 QUAKER RD

City  
ORCHARD PARKState  
NYZip Code  
14127-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SELF-EMPLOYED

ENTREPRENEUR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : A756346D5C93A4BC9B7B

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

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

PAGE 122 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ALLEN, SCOTT, S., JR.

**A.**

Mailing Address 201 ADMIRALS WALK

City

BUFFALO

State

NY

Zip Code

14202-4331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIPPES MATHIAS LLP

Occupation

ATTORNEY

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : AFBCA890FDC784971AF3

Amount of Each Receipt this Period

200.00



Memo Item

[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**B.**

Full Name (Last, First, Middle Initial)

JDLA LLC

Mailing Address 625 DELAWARE AVE  
STE 141

City

BUFFALO

State

NY

Zip Code

14202-1008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : A077230ACAD2641BEBC9

Amount of Each Receipt this Period

200.00



Memo Item

PARTNERSHIP CONTRIBUTION, SEE ATTRIBUTION  
BELOW. [LANGWORTHY CONGRESSIONAL**C.**

Full Name (Last, First, Middle Initial)

ZACCAGNINO, JOETTE, P., ,

Mailing Address 41 WESTMORELAND RD

City

AMHERST

State

NY

Zip Code

14226-4253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : A9AEDD00D0F7648BF8BB

Amount of Each Receipt this Period

200.00



Memo Item

PARTNER ATTRIBUTION FOR JDLA LLC  
[LANGWORTHY CONGRESSIONAL VICTORY**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LANGWORTHY CONGRESSIONAL VICTORY COMMITTEE****A.**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120FEC ID number of contributing  
federal political committee.**C** C00832188

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

72303.40

Date of Receipt

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

Transaction ID : AA6B4B98F625E400692E

Amount of Each Receipt this Period

32339.87

☐ Memo ItemTRANSFER OF JOINT FUNDRAISING PROCEEDS,  
SEE CONTRIBUTIONS BELOW**B.**

Full Name (Last, First, Middle Initial)

REID, PAUL, D., ,

Mailing Address 4564 THRALL RD

City  
LOCKPORTState  
NYZip Code  
14094-9784FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

REID COS.

CEO

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : A922E1645C10648B0A7A

Amount of Each Receipt this Period

1500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**C.**

Full Name (Last, First, Middle Initial)

LANDA, JUDY, , ,

Mailing Address 182 BRIARWOOD CROSSING

City  
LAWRENCEState  
NYZip Code  
11559-2708FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : AC41E484B374347FE82B

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**SUBTOTAL** of Receipts This Page (optional)..... ▶

32339.87

**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WILLIAMS, JEFFREY, D., ,

**A.**

Mailing Address 636 MOUNTAIN VIEW DR

City

LEWISTON

State

NY

Zip Code

14092-1910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
REAL ESTATE

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 14 2024

Transaction ID : A2DC760F2BCF843E4B0D

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

GERNATT, ROSEANN, , ,

**B.**

Mailing Address 6707 WINDWARD PALMS CT

City

LAKE WALES

State

FL

Zip Code

33898-9600

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AD14CAA14C50A4EC2820

Amount of Each Receipt this Period

1500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

BRYLINSKI, JAMES, C., ,

**C.**

Mailing Address 6631 JEWETT HOLMWOOD ROAD

City

ORCHARD PARK

State

NY

Zip Code

14127-3019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US DEPT. OF HUDOccupation  
ATTORNEY

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : AC5F2B446495B4ED2A5B

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

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

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BUCHHEIT, GERALD, A., ,

**A.**

Mailing Address 3275 N BENZING RD

City

ORCHARD PARK

State

NY

Zip Code

14127-1519

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOY VAULT STORAGE

Occupation

DEVELOPER

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : AF3C9D22D56284DDB87D

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

LANDA, BENJAMIN, , ,

**B.**

Mailing Address 182 BRIARWOOD CROSSING

City

LAWRENCE

State

NY

Zip Code

11559-2708

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE PREMIER NETWORK

Occupation

EXECUTIVE

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A776F0864B6E547C8B76

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

DOMAGALSKI, JAMES, P., ,

**C.**

Mailing Address 75 HAWTHORNE DR

City

ORCHARD PARK

State

NY

Zip Code

14127-1958

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BARCLAY DAMON, LLP

Occupation

ATTORNEY

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A47A571A7ED7C4A049D2

Amount of Each Receipt this Period

1500.00

☒ Memo ItemPARTNER ATTRIBUTION FOR BARCLAY DAMON  
LLP [LANGWORTHY CONGRESSIONAL VICTORY**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 126 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BARCLAY DAMON LLP****A.** Mailing Address 125 E JEFFERSON STCity  
SYRACUSEState  
NYZip Code  
13202-2020FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2025

Transaction ID : ABA7EC99937C5423A935

Amount of Each Receipt this Period

1500.00

☒ Memo ItemPARTNERSHIP CONTRIBUTION, SEE ATTRIBUTION  
BELOW. [LANGWORTHY CONGRESSIONAL

Full Name (Last, First, Middle Initial)

**GALANIS, TERRY, S., , JR.****B.** Mailing Address 11370 SUEMARTOM CTCity  
MARILLAState  
NYZip Code  
14102-9707FEC ID number of contributing  
federal political committee.

C

Name of Employer

SEALING DEVICES, INC.

Occupation  
EXECUTIVE

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : AC92CEF8AE6AD45CF9CE

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]

Full Name (Last, First, Middle Initial)

**SMITH, GLENN, , ,****C.** Mailing Address 7355 QUAKER RDCity  
ORCHARD PARKState  
NYZip Code  
14127-2010FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation  
ENTREPRENEUR

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 21 2025

Transaction ID : ACCB834D713994CC5A21

Amount of Each Receipt this Period

3500.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 127 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ALLEN, SCOTT, S., JR.

**A.** Mailing Address 201 ADMIRALS WALK

City

BUFFALO

State

NY

Zip Code

14202-4331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIPPES MATHIAS LLP

Occupation

ATTORNEY

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4300.00

Date of Receipt

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

Transaction ID : AE59372D4E8DD423FA0A

Amount of Each Receipt this Period

800.00

☒ Memo Item[LANGWORTHY CONGRESSIONAL VICTORY  
COMMITTEE - C00832188]**B.** Full Name (Last, First, Middle Initial)  
JDLA LLCMailing Address 625 DELAWARE AVE  
STE 141

City

BUFFALO

State

NY

Zip Code

14202-1008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3700.00

Date of Receipt

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

Transaction ID : AE269D18C998B48E79B2

Amount of Each Receipt this Period

3500.00

☒ Memo ItemPARTNERSHIP CONTRIBUTION, SEE ATTRIBUTION  
BELOW. [LANGWORTHY CONGRESSIONAL**C.** Full Name (Last, First, Middle Initial)  
ZACCAGNINO, JOETTE, P., ,

Mailing Address 41 WESTMORELAND RD

City

AMHERST

State

NY

Zip Code

14226-4253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A49B3A1A6B81B486B9EB

Amount of Each Receipt this Period

3500.00

☒ Memo ItemPARTNER ATTRIBUTION FOR JDLA LLC  
[LANGWORTHY CONGRESSIONAL VICTORY**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

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

72303.40

# **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 128 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SOUTHWEST AIRLINES**

**A.** Mailing Address 2702 LOVE FIELD DR

City  
DALLAS

State  
TX

Zip Code  
75235-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

502.48

Date of Receipt

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

Transaction ID : AE76077FA84744CEE81E

Amount of Each Receipt this Period

502.48

☐ Memo Item

REFUND: TRAVEL

Full Name (Last, First, Middle Initial)

**UNITED AIRLINES INC**

**B.** Mailing Address 233 S WACKER DR  
STE 710

City  
CHICAGO

State  
IL

Zip Code  
60606-6435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

387.49

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 11 2025

Transaction ID : A9B77BC9F53734487A88

Amount of Each Receipt this Period

387.49

☐ Memo Item

REFUND: TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

889.97

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

889.97



# **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 129 OF 177

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

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NAME OF COMMITTEE (In Full)

**LANGWORTHY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FIDELITY INVESTMENTS

**A.**

Mailing Address 245 SUMMER ST

City  
BOSTON

State  
MA

Zip Code  
02210-1133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9427.51

Date of Receipt

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

Transaction ID : ABE9EFDB0CB364959890

Amount of Each Receipt this Period

8916.76

☐ Memo Item

INVESTMENT INCOME

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

8916.76

8916.76

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

PAGE 130 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE N

Date of Disbursement

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

City  
SEATTLEState  
WAZip Code  
98109-5210

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

38.12

Transaction ID : B0E89D0845E4043CAB43

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMAZON**

Mailing Address 410 TERRY AVE N

Date of Disbursement

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

City  
SEATTLEState  
WAZip Code  
98109-5210

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

20.02

Transaction ID : B535A2EDE2118493498C

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

Date of Disbursement

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

City  
FORT WORTHState  
TXZip Code  
76155-1801

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

398.48

Transaction ID : B89C05AC5474246D49D6

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

456.62

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

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

PAGE 131 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

31.37

Transaction ID : BD6FE30F4EA1744D7B49

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

65.49

Transaction ID : B4EED8B94926E4031A92

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

390.96

Transaction ID : B8506F1763AF04B18AA0

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

487.82

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

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

PAGE 132 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

223.48

Transaction ID : B162D1F38EBE44190906

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.60

Transaction ID : BB7B76379590043E7BF7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.40

Transaction ID : BF78A0CDF0DA2445E9E3

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

251.48

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

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

PAGE 133 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : BDA4FACB53DD048B6877

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : BB682B0DF42A34B9BB9C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.30

Transaction ID : BD59B7690B2D540A9B7D

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

81.90

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

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

PAGE 134 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

477.30

Transaction ID : BF473AB2A909D4D54922

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

264.30

Transaction ID : B22918AB7A88F41569EA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

132.30

Transaction ID : B85F6510BFB26439F831

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

873.90

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

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

PAGE 135 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

132.30

Transaction ID : B7560812CAB204E60AF3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.30

Transaction ID : B4AD2342686C44D37879

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.30

Transaction ID : B48F162B531074730AAC

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

146.90

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

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

PAGE 136 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : BE3D763EA62A542CAA23

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.30

Transaction ID : B9CD0E8051BD341C3A62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : B801238CE49FE406CA53

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

90.90

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



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

PAGE 137 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

191.80

Transaction ID : B70ED70C798174D44A41

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

56.06

Transaction ID : B149C9A9360A54AAF9BD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : B5DD11407AF22460EAE3

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

268.16

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

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

PAGE 138 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

162.90

Transaction ID : B22CF6EE2E90641D7B08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : BB689E35A6CC544D0A54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

8.60

Transaction ID : B41B5AAD253CD4C46934

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

191.80

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

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

PAGE 139 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

34.90

Transaction ID : B20FE39800D004F21BF8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4.26

Transaction ID : B50A23F656125457BA59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.30

Transaction ID : B467C0917914A4AA180A

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

79.46

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

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

PAGE 140 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4.26

Transaction ID : B8D5A7B7C14684B65A55

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.60

Transaction ID : B3E3F9B424FC24BE3850

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT INC**

Mailing Address 1340 POYDRAS ST

City  
NEW ORLEANSState  
LAZip Code  
70112-1221Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

180.60

Transaction ID : BFD0EFD96BAF4047BAE

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

225.46

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

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

PAGE 141 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

21.19

Transaction ID : BBB89BFB46F834A8B912

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

36.03

Transaction ID : BD00E580CC310427E856

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : B6EFD C2A70B6C4580A40

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

67.21

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

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

PAGE 142 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

115.54

Transaction ID : B1093E75392DD478B852

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.29

Transaction ID : B0881BD0D813B4F78889

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.13

Transaction ID : B1A1F3522AAD34FA28F2

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

145.96

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

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

PAGE 143 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

21.19

Transaction ID : B0D1E2F035EF44CB69A6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : BACEFB8A1A03E4455A98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.29

Transaction ID : B6E0466267C1D42B4962

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

41.47

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

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

PAGE 144 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.13

Transaction ID : BE7F4985BDFD24F85A80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. APPLE INC.**

Mailing Address ONE APPLE PARK WAY

City  
CUPERTINOState  
CAZip Code  
95014-0642Purpose of Disbursement  
PHONE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

127.19

Transaction ID : B41D81A7207A64061A53

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ARENA LLC**Mailing Address 1260 E STRINGHAM AVE  
# 350City  
SALT LAKE CITYState  
UTZip Code  
84106-2963Purpose of Disbursement  
WEBSITE SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

95.61

Transaction ID : B5392000BB9D8462D8BC

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

242.93

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



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

PAGE 145 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ARENA LLC**Mailing Address 1260 E STRINGHAM AVE  
# 350City  
SALT LAKE CITYState  
UTZip Code  
84106-2963Purpose of Disbursement  
WEBSITE SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : B87F7D92DB9FD4EE79F4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL INC**

Mailing Address PO BOX 716045

City  
PHILADELPHIAState  
PAZip Code  
19171-6045Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2400.00

Transaction ID : BD75573D27A5A46B18C7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AVIS RENTAL CAR**

Mailing Address P.O. BOX 699000

City  
TULSAState  
OKZip Code  
74169Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

205.83

Transaction ID : B77B8795580DC4E9B8DE

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

2805.83

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

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

PAGE 146 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AVIS RENTAL CAR**

Mailing Address P.O. BOX 699000

City  
TULSAState  
OKZip Code  
74169Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.18

Transaction ID : B80B48B8CFDC44E0D90E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BAKER, PAMELA, , ,**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B20F4AC7501974FC89EE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BAKER, PAMELA, , ,**

Mailing Address PO BOX 120

City  
CLARENCEState  
NYZip Code  
14031-0120Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B8D7A1F991E9043C1ABC

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

2009.18

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

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

PAGE 147 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BAKER, PAMELA, , ,**

Mailing Address PO BOX 120

Date of Disbursement

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

City  
CLARENCEState  
NYZip Code  
14031-0120

FEC Identification Number

C

Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : BE3E14711D3B54770BB8

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. BOBBY VANS STEAKHOUSE**

Mailing Address 809 15TH ST NW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20005-2203

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

127.50

Transaction ID : BB3E793A9AC4849F0BA3

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. BOBBY VANS STEAKHOUSE**

Mailing Address 809 15TH ST NW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20005-2203

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

17.60

Transaction ID : BF8C6FDBA4D2E4955AAD

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1145.10

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

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

PAGE 148 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BOBBY VANS STEAKHOUSE**

Mailing Address 809 15TH ST NW

City  
WASHINGTONState  
DCZip Code  
20005-2203Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

206.10

Transaction ID : BD92A0D42DAC54DC1A0F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BROGHAMER CONSULTING LLC**

Mailing Address 502 MONROE ST

City  
NEWPORTState  
KYZip Code  
41071-2006Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3761.03

Transaction ID : B6E1AB13788FA493188D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROGHAMER CONSULTING LLC**

Mailing Address 502 MONROE ST

City  
NEWPORTState  
KYZip Code  
41071-2006Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3909.03

Transaction ID : B72DF4578806A4E048EB

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

7876.16

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

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

PAGE 149 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BUDGET CAR RENTAL**

Mailing Address 6 SYLVAN WAY

City  
PARSIPPANYState  
NJZip Code  
07054-3826Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

327.30

Transaction ID : BE0E953B9FE084F3DA9C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BUDGET CAR RENTAL**

Mailing Address 6 SYLVAN WAY

City  
PARSIPPANYState  
NJZip Code  
07054-3826Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.09

Transaction ID : BFD067CD9171E428AA91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPELIANIS CONSULTING**

Mailing Address 221 N PATRICK ST

City  
ALEXANDRIAState  
VAZip Code  
22314-2440Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : BA34ABC99D9F04899B86

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

10347.39

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

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

PAGE 150 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPELIANIS CONSULTING**

Mailing Address 221 N PATRICK ST

City  
ALEXANDRIAState  
VAZip Code  
22314-2440Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2408.00

Transaction ID : BA9AE7C4727134EE084F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPELIANIS CONSULTING**

Mailing Address 221 N PATRICK ST

City  
ALEXANDRIAState  
VAZip Code  
22314-2440Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : B8675C3C07D2D4C1CB59

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPELIANIS CONSULTING**

Mailing Address 221 N PATRICK ST

City  
ALEXANDRIAState  
VAZip Code  
22314-2440Purpose of Disbursement  
FINANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

16101.84

Transaction ID : B8BAB9021BC6D4512984

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

28509.84

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

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

PAGE 151 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

292.25

Transaction ID : B4D82258A11DB40D9BE2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

233.68

Transaction ID : B09C744A7CC594CCBBEE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CASILIO COMMUNICATIONS LLC**Mailing Address 8899 MAIN ST  
SUITE 105City  
WILLIAMSVILLEState  
NYZip Code  
14221-7628Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.00

Transaction ID : B6E6F3C3DE2134E518AE

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

1775.93

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

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

PAGE 152 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CASILIO COMMUNICATIONS LLC**Mailing Address 8899 MAIN ST  
SUITE 105City  
WILLIAMSVILLEState  
NYZip Code  
14221-7628Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.00

Transaction ID : BCFAD426266C344039E2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CASILIO COMMUNICATIONS LLC**Mailing Address 8899 MAIN ST  
SUITE 105City  
WILLIAMSVILLEState  
NYZip Code  
14221-7628Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.00

Transaction ID : B8229DA4C28C240AB812

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CLARENCE REPUBLICAN COMMITTEE**

Mailing Address PO BOX 207

City  
CLARENCE CENTERState  
NYZip Code  
14032-0207Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name

CLARENCE REPUBLICAN COMMITTEE

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B5B56149F23AB4F378E5

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

2750.00

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



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

PAGE 153 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO RD

City  
WALTHAMState  
MAZip Code  
02451-7333Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

528.94

Transaction ID : B88EDE20D15A74F3E8DD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO RD

City  
WALTHAMState  
MAZip Code  
02451-7333Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

528.94

Transaction ID : BB765204721C445C3825

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO RD

City  
WALTHAMState  
MAZip Code  
02451-7333Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

528.94

Transaction ID : B1B42107C37954523AE5

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

1586.82

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

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

PAGE 154 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. COURTYARD**

Mailing Address 7750 WISCONSIN AVE

Date of Disbursement

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

City  
BETHESDAState  
MDZip Code  
20814-3522

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

311.45

Transaction ID : B814E8B84412C4D02B31

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

Date of Disbursement

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

City  
ATLANTAState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

618.48

Transaction ID : B0B73C46C44D741189E5

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. EXXONMOBIL**

Mailing Address 5959 LAS COLINAS BLVD

Date of Disbursement

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

City  
IRVINGState  
TXZip Code  
75039-4202

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

40.00

Transaction ID : B10CC6F213B744971AEA

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

969.93

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

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

PAGE 155 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GIANCARLOS SICILIAN STEAKHOUSE**

Mailing Address 5110 MAIN ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2025

City  
WILLIAMSVILLEState  
NYZip Code  
14221-5256

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

824.02

Transaction ID : B46F836E7805240B6B4D

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. HORNELL CITY REPUBLICAN COMMITTEE**

Mailing Address PO BOX 64

Date of Disbursement

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

City  
HORNELLState  
NYZip Code  
14843-0064

FEC Identification Number

C

Purpose of Disbursement  
ADVERTISING/EVENT TICKET

001

Amount of Each Disbursement this Period

260.00

Transaction ID : BD656DBCE3446430B84D

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. HOTELS.COM**Mailing Address 5400 LYNDON B JOHNSON FWY  
STE 500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2025

City  
DALLASState  
TXZip Code  
75240-1019

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

416.26

Transaction ID : B36716AF6C4234C08AD1

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1500.28

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

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

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. JETBLUE AIRWAYS**

Mailing Address 2701 QUEENS PLZ N

Date of Disbursement

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

City  
LONG ISLAND CITYState  
NYZip Code  
11101-4020

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

382.90

Transaction ID : B80DCE943768F4705B11

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. JETBLUE AIRWAYS**

Mailing Address 2701 QUEENS PLZ N

Date of Disbursement

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

City  
LONG ISLAND CITYState  
NYZip Code  
11101-4020

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

23.00

Transaction ID : BD0E5AE64201749FCB7B

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. LYFT**Mailing Address 185 BERRY ST  
STE 5000

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94107-2503

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.00

Transaction ID : BFE9463E1837E428C9D3

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

455.90

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

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

PAGE 157 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

38.04

Transaction ID : B850C2B1DA6D74F3DAB7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

243.46

Transaction ID : B43E75065061043058A6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : BD0A9E9A59423401F91C

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

286.50

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

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

PAGE 158 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

130.77

Transaction ID : B492B584E6CB641A2BA0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

108.70

Transaction ID : BA3C63D0A990C4C468E7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.56

Transaction ID : B014A790BACD34C88926

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

263.03

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

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

PAGE 159 OF 177

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

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. LYFT**Mailing Address 185 BERRY ST  
STE 5000City  
SAN FRANCISCOState  
CAZip Code  
94107-2503Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

33.64

Transaction ID : B53C9E7D8EE254AABBE7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4126.90

Transaction ID : B03CAF22DFD584D57B7E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

55.64

Transaction ID : BB2EB7432F3B34A7690C

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4216.18

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 160 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

90.08

Transaction ID : B628FF3D8EF4D4643849

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3090.16

Transaction ID : B236ECB494FC54331832

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

166.41

Transaction ID : B206D676B40294F358E0

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3346.65

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 161 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MARKETING TECH**Mailing Address 2495 MAIN ST  
SUITE 220City  
BUFFALOState  
NYZip Code  
14214-2156Purpose of Disbursement  
PRINT/DIGITAL MARKETING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1545.75

Transaction ID : BCAD70FB5DE254132912

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NEW YORK STATE CONSERVATIVE PARTY**Mailing Address 8829 FORT HAMILTON PKWY  
D1City  
BROOKLYNState  
NYZip Code  
11209-6049Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

NEW YORK STATE CONSERVATIVE PARTY

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	2	5

FEC Identification Number

C C00282343

Amount of Each Disbursement this Period

2500.00

Transaction ID : B35305F4EFFF64FF8AE0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NYS REPUBLICAN ASSEMBLY CAMPAIGN COMMITTEE**

Mailing Address 315 STATE ST

City  
ALBANYState  
NYZip Code  
12210-2001Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name

NYS REPUBLICAN ASSEMBLY CAMPAIGN COMMITTEE

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	5

FEC Identification Number

C C00153007

Amount of Each Disbursement this Period

1500.00

Transaction ID : B8B84EDEFD0B84845BA3

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5545.75

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PAULA'S DONUTS**

Mailing Address 936 UNION RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2025

City  
WEST SENECAState  
NYZip Code  
14224-3425

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

226.88

Transaction ID : BF389C76834CA47F38FB

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. REIKART HOUSE**

Mailing Address 5000 MAIN ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2025

City  
BUFFALOState  
NYZip Code  
14226-4955

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

2500.00

Transaction ID : B4300F69915214D18BAE

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. REIKART HOUSE**

Mailing Address 5000 MAIN ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2025

City  
BUFFALOState  
NYZip Code  
14226-4955

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

2497.56

Transaction ID : BA3FC202271B649F89AE

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

5224.44

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 163 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235-1908Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

393.49

Transaction ID : B3E2B9CC2B64E4E538BA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235-1908Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

343.48

Transaction ID : BC0347E4DBAD2401C980

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235-1908Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

502.48

Transaction ID : B197FC2ABBF6F4580907

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1239.45

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 164 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. TARGET**Mailing Address 1000 NICOLLET MALL  
# TPS-3165City  
MINNEAPOLISState  
MNZip Code  
55403-2542Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

180.24

Transaction ID : BDCACED801B964A8EAFc

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TARGET**Mailing Address 1000 NICOLLET MALL  
# TPS-3165City  
MINNEAPOLISState  
MNZip Code  
55403-2542Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

67.48

Transaction ID : B2AA1EC7071C342F6B6C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE CONGRESSIONAL CLUB MUSEUM AND FOUNDATION**

Mailing Address 2001 NEW HAMPSHIRE AVE NW

City  
WASHINGTONState  
DCZip Code  
20009-3414Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1015.00

Transaction ID : B95043770CAFF40BB970

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1262.72

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 165 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THOMAS MEDIA GROUP**

Mailing Address 8 SNOWBERRY RD

City  
BALLSTON SPAState  
NYZip Code  
12020-4444Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

910.00

Transaction ID : B7E448EC80B19478996A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

48.45

Transaction ID : B158657769DA94396811

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

43.80

Transaction ID : BA863B32943674A908DC

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1002.25

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 166 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY 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

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	1	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.82

Transaction ID : B8B6723F3ECD6405FBB8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES INC**Mailing Address 233 S WACKER DR  
STE 710City  
CHICAGOState  
ILZip Code  
60606-6435Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

387.49

Transaction ID : BCF7E301521304C96B36

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 475 LENFANT PLZ SW

City  
WASHINGTONState  
DCZip Code  
20260-0004Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	4	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

12.95

Transaction ID : BC768DDDB32E384E9CAED

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

420.26

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		16		2025

City  
WASHINGTONState  
DCZip Code  
20260-0004

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

34.00

Transaction ID : B8670278C20224D2099D

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2025

City  
WASHINGTONState  
DCZip Code  
20260-0004

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

31.40

Transaction ID : B8E83B7F721DD4960B48

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
WASHINGTONState  
DCZip Code  
20260-0004

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

73.00

Transaction ID : BA17B5AF71B184DAC824

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

138.40

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 168 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 LENFANT PLZ SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
WASHINGTONState  
DCZip Code  
20260-0004

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Amount of Each Disbursement this Period

14.60

Transaction ID : B05B52EE29DFE42FE868

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WENDELVILLE FIRE COMPANY INC**

Mailing Address 7340 CAMPBELL BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2025

City  
NORTH TONAWANDAState  
NYZip Code  
14120-9614

FEC Identification Number

C

Purpose of Disbursement  
EVENT SPONSORSHIP

001

Amount of Each Disbursement this Period

500.00

Transaction ID : BD9A58A959F9D461386B

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WEST ROSE RESTAURANT**

Mailing Address 23 WASHINGTON ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2025

City  
ELLICOTTVILLEState  
NYZip Code  
14731

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

1496.59

Transaction ID : BCF61B8A89A39484F927

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

2011.19

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 169 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	1		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

39.40

Transaction ID : B4EDF5DFF4B224DE18F5

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

19.70

Transaction ID : BBBB2676DC0649E28C5

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

19.70

Transaction ID : B47E91F421A8542A295B

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

78.80

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 170 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

604.09

Transaction ID : B62234426899643DE831

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

285.65

Transaction ID : B2B24E1F9102D44DEB69

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

13.75

Transaction ID : BDEBDE02B46CF4782AEA

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

903.49

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 171 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Category/  
Type

Amount of Each Disbursement this Period

23.64
-------

Transaction ID : B011A1766F31C443FAB1

☐ Memo ItemCandidate Name  
WINRED

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Category/  
Type

Amount of Each Disbursement this Period

19.70
-------

Transaction ID : BB60E9CF26D2846E4B26

☐ Memo ItemCandidate Name  
WINRED

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C	C00694323
---	-----------

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Category/  
Type

Amount of Each Disbursement this Period

3.90
------

Transaction ID : BD871883BA11C42CA940

☐ Memo ItemCandidate Name  
WINRED

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

47.24
-------

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 172 OF 177

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

240.34

Transaction ID : B083A94862F1B4922BCE

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

78.80

Transaction ID : B1815DB914432453D927

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

112.29

Transaction ID : B72A9A535BA08409B84B

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

431.43

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

161.92

Transaction ID : B876176B1A6FA429BB94

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

24.44

Transaction ID : B80E246AB3DF649E083C

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

78.01

Transaction ID : B44E5CFF33AF24A25A97

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

264.37

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

3.90

Transaction ID : B8319ABB42D31404BB9A

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

141.80

Transaction ID : BD8CC9498184D425A86D

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

**C** C00694323Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

98.69

Transaction ID : BA86AD6A7E7134328BF4

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

244.39

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2025

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C C00694323

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

001

Amount of Each Disbursement this Period

20.10

Candidate Name  
WINREDCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Transaction ID : B3F008314133B4AE6995

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

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) ▼		

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

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) ▼		

☐ Memo Item

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

20.10

**TOTAL** This Period (last page this line number only).....▶

92330.97

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 176 OF 177

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MILITELLO, JOHN, S., ,**

Mailing Address 493 KENNEDY RD

City  
BUFFALOState  
NYZip Code  
14227-1039Purpose of Disbursement  
REFUND: CONTRIBUTION REFUND

010

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : BF8B55893D1654F7FB48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

300.00

**TOTAL** This Period (last page this line number only).....▶

300.00



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 177 OF 177

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LANGWORTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ENERGY VOICES PAC**Mailing Address 2200 GEORGETOWN DR  
STE 500City  
SEWICKLEYState  
PAZip Code  
15143-8753Purpose of Disbursement  
REFUND: CONTRIBUTION REFUND

010

Candidate Name  
ENERGY VOICES PACCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2024  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BF76F4F3D09194334A71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement 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

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement 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).....▶

500.00

**TOTAL** This Period (last page this line number only).....▶

500.00