

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

McCaul for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 12 / 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))	12000.00	102128.50
(b) Total Contribution Refunds (from Line 20(d))	43300.00	43300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 31300.00	58828.50
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	18113.17	436436.59
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	250.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	18113.17	436186.59
8. Cash on Hand at Close of Reporting Period (from Line 27)		
	3410.78	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
	25800.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

McCaul for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	38696.91
(ii) Unitemized.....	0.00	20131.59
(iii) TOTAL of contributions from individuals ▶	0.00	58828.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	12000.00	43300.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	12000.00	102128.50
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	126499.53
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	25800.00	25800.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	25800.00	25800.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	250.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	37800.00	254678.03

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.....	18113.17	436436.59
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	43300.00	43300.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	43300.00	43300.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	61413.17	479736.59

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	27023.95
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	37800.00
25. SUBTOTAL (add Line 23 and Line 24).....	64823.95
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	61413.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3410.78

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

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

FOR LINE NUMBER: PAGE 5 OF 24
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
McCaul for Congress

A. Full Name (Last, First, Middle Initial)
HONOR COURAGE COMMITMENT PAC

Mailing Address 11613 HUEBNER RD

City SAN ANTONIO State TX Zip Code 78230-1293

FEC ID number of contributing federal political committee. **C** C00755173

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
 11 / 20 / 2025

Transaction ID : SA11C.110627

Amount of Each Receipt this Period
5000.00

Memo Item
 CONTRIBUTION
 PRIMARY 2026 DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
BUILDING AMERICAN CONSERVATISM PAC

Mailing Address PO BOX 341027
#353

City AUSTIN State TX Zip Code 78734-0018

FEC ID number of contributing federal political committee. **C** C00553883

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2025

Transaction ID : SA11C.110628

Amount of Each Receipt this Period
2000.00

Memo Item
 CONTRIBUTION
 DEBT RETIREMENT-PRIMARY 2026

C. Full Name (Last, First, Middle Initial)
VICTORY EAST

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C** C00724229

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
 12 / 19 / 2025

Transaction ID : SA11C.110629

Amount of Each Receipt this Period
5000.00

Memo Item
 CONTRIBUTION
 DEBT RETIREMENT PRIMARY 2026

SUBTOTAL of Receipts This Page (optional).....▶	12000.00
TOTAL This Period (last page this line number only).....▶	12000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 24
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
McCaul for Congress

A. Full Name (Last, First, Middle Initial)
MCCAUL, MICHAEL, , ,

Mailing Address 815 BRAZOS ST STE A PMB 230

City AUSTIN State TX Zip Code 78701-2514

FEC ID number of contributing federal political committee. **C** C00392688

Name of Employer U.S. HOUSE OF REPRESENTATIVES Occupation CONGRESSMAN

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
25800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 31 / 2025

Transaction ID : SA13A.6830

Amount of Each Receipt this Period
25800.00

Memo Item
CANDIDATE LOAN- PERSONAL FUNDS

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

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

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

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).....▶	25800.00
TOTAL This Period (last page this line number only).....▶	25800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 24			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial) A. CHASE CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address PO BOX 94014		FEC Identification Number C
City PALATINE	State IL	Zip Code 60094
Purpose of Disbursement CREDIT CARD PAYMENT		Amount of Each Disbursement this Period 1688.56
Candidate Name		Transaction ID : SB17.10000
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address PO BOX 2971		FEC Identification Number C
City OMAHA	State NE	Zip Code 68103
Purpose of Disbursement PHONE SVC		Amount of Each Disbursement this Period 370.47
Candidate Name		Transaction ID : SB17.20002
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2025
Mailing Address PO BOX 2971		FEC Identification Number C
City OMAHA	State NE	Zip Code 68103
Purpose of Disbursement PHONE SVC		Amount of Each Disbursement this Period 578.52
Candidate Name		Transaction ID : SB17.20008
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1688.56
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 Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial)
A. HOUSTON CHRONICLE

Mailing Address 4747 SOUTHWEST FWY

City HOUSTON State TX Zip Code 77027

Purpose of Disbursement SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 103.63

Transaction ID : SB17.20001

Memo Item

Full Name (Last, First, Middle Initial)
B. HOUSTON CHRONICLE

Mailing Address 4747 SOUTHWEST FWY

City HOUSTON State TX Zip Code 77027

Purpose of Disbursement SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 83.64

Transaction ID : SB17.20007

Memo Item

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

Mailing Address 675 PONCE DE LEON AVE NE
SUITE 5000

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement WEB SEVC/SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 804.83

Transaction ID : SB17.20004

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial)

A. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE
SUITE 5000

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement WEB SEVC/SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y
10 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 804.83

Transaction ID : SB17.20010

Memo Item

Full Name (Last, First, Middle Initial)

B. RIGHTSPACE STORAGE

Mailing Address 8956 RESEARCH BLVD

City AUSTIN State TX Zip Code 78758

Purpose of Disbursement STORAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y
10 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 214.00

Transaction ID : SB17.20003

Memo Item

Full Name (Last, First, Middle Initial)

C. RIGHTSPACE STORAGE

Mailing Address 8956 RESEARCH BLVD

City AUSTIN State TX Zip Code 78758

Purpose of Disbursement STORAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y
10 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 214.00

Transaction ID : SB17.20009

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

A. UBER

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET ST #400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 77.63

Transaction ID : SB17.20006

Memo Item

B. UBER

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET ST #400

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 475.45

Transaction ID : SB17.20012

Memo Item

C. UNITED AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 233 S WACKER DR STE 430

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 01 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 118.00

Transaction ID : SB17.20005

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2025
Mailing Address 233 S WACKER DR STE 430		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 921.08	
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) ▼	Transaction ID : SB17.20011
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BERKE FARRAH LLP		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025
Mailing Address 873 N HARRISON ST		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22205
Purpose of Disbursement LEGAL CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1140.00	
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) ▼	Transaction ID : SB17.10004
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. RIGHTSIDE COMPLIANCE		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025
Mailing Address PO BOX 341027		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78734
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 3122.50	
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) ▼	Transaction ID : SB17.10003
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	4262.50
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 Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 24			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial)

A. RISING COMMUNICATIONS

Mailing Address 2 I ST SE #1105

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 07 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 5000.00

Transaction ID : SB17.10002

Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 08 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 118.20

Transaction ID : SB17.10005

Memo Item

Full Name (Last, First, Middle Initial)

C. CHASE CARD SERVICES

Mailing Address PO BOX 94014

City PALATINE State IL Zip Code 60094

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 3077.52

Transaction ID : SB17.10006

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 8195.72

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 Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial) A. INTUIT		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025
Mailing Address 2700 COAST AVE		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTION	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 79.95	
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) ▼	Transaction ID : SB17.20013
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PLAINS CAPITAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025
Mailing Address 2323 VICTORY AVE		FEC Identification Number C
City DALLAS	State TX	Zip Code 75219
Purpose of Disbursement BANK FEE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 74.25	
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) ▼	Transaction ID : SB17.10008
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ADP		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2025
Mailing Address 1 ADP BLVD		FEC Identification Number C
City ROSELAND	State NJ	Zip Code 07068
Purpose of Disbursement PAYROLL SVC/TAXES	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 9.54	
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) ▼	Transaction ID : SB17.10011
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	163.74
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 Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 24			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2025
Mailing Address PO BOX 2971		FEC Identification Number C
City OMAHA	State NE	Zip Code 68103
Purpose of Disbursement PHONE SVC	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 168.76	
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) ▼	Transaction ID : SB17.10009
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2025
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT SVC	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 900.00	
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) ▼	Transaction ID : SB17.10010
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2025
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHIGNTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 60.00	
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) ▼	Transaction ID : SB17.10013
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1128.76
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 Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 24			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2700 COAST AVE

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 13 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 79.95

Transaction ID : SB17.10012

Memo Item

Full Name (Last, First, Middle Initial)

B. PLAINS CAPITAL

Mailing Address 2323 VICTORY AVE

City DALLAS State TX Zip Code 75219

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 74.56

Transaction ID : SB17.10014

Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO BOX 2971

City OMAHA State NE Zip Code 68103

Purpose of Disbursement PHONE SVC

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 168.76

Transaction ID : SB17.10015

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 323.27

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 Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 24	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. CMDI		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 1593 SPRING HILL RD SUITE 400		<input type="text"/> 11 / <input type="text"/> 26 / <input type="text"/> 2025
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT SVC	<input type="text"/>	
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: <input type="text"/> District: <input type="text"/>	Amount of Each Disbursement this Period <input type="text"/> 900.00	
Full Name (Last, First, Middle Initial)		Transaction ID : SB17.10016
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. ADP		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 1 ADP BLVD		<input type="text"/> 12 / <input type="text"/> 05 / <input type="text"/> 2025
City ROSELAND	State NJ	Zip Code 07068
Purpose of Disbursement PAYROLL SVC/TAXES	<input type="text"/>	
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: <input type="text"/> District: <input type="text"/>	Amount of Each Disbursement this Period <input type="text"/> 58.58	
Full Name (Last, First, Middle Initial)		Transaction ID : SB17.10017
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. CAPITOL HILL CLUB		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y
Mailing Address 300 FIRST ST SE		<input type="text"/> 12 / <input type="text"/> 09 / <input type="text"/> 2025
City WASHIGNTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGE	<input type="text"/>	
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: <input type="text"/> District: <input type="text"/>	Amount of Each Disbursement this Period <input type="text"/> 168.95	
Full Name (Last, First, Middle Initial)		Transaction ID : SB17.10018
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text"/> 1127.53
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 24			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial) A. INTUIT		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 2700 COAST AVE		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043
Purpose of Disbursement SUBSCRIPTION	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 79.95	
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) ▼	Transaction ID : SB17.10019
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PLAINS CAPITAL		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 2323 VICTORY AVE		FEC Identification Number C
City DALLAS	State TX	Zip Code 75219
Purpose of Disbursement BANK FEE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 74.38	
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) ▼	Transaction ID : SB17.10020
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2025
Mailing Address PO BOX 2971		FEC Identification Number C
City OMAHA	State NE	Zip Code 68103
Purpose of Disbursement PHONE SVC	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 168.76	
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) ▼	Transaction ID : SB17.10021
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	323.09
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 Page

FOR LINE NUMBER: PAGE 18 OF 24
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. CMDI		M M / D D / Y Y Y Y 12 / 30 / 2025	
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number	
City TYSONS CORNER	State VA	C	
Zip Code 22182		Amount of Each Disbursement this Period	
Purpose of Disbursement DATABASE MANAGEMENT SVC	Category/Type	900.00	
Candidate Name		Transaction ID : SB17.10022	
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) ▼	<input type="checkbox"/> Memo Item	
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		M M / D D / Y Y Y Y	
Mailing Address		FEC Identification Number	
City	State	C	
Zip Code		Amount of Each Disbursement this Period	
Purpose of Disbursement	Category/Type		
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y	
Mailing Address		FEC Identification Number	
City	State	C	
Zip Code		Amount of Each Disbursement this Period	
Purpose of Disbursement	Category/Type		
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	18113.17

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 24	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial) A. BEAL, ANDREW, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025	
Mailing Address 6600 LEGACY DR			FEC Identification Number C	
City PLANO	State TX	Zip Code 75024	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	Transaction ID : SB20.3002	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. BOOKOUT, ANN, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025	
Mailing Address 3620 WILLOWWICK RD			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77019	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	Transaction ID : SB20.3001	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BOOKOUT, JOHN, , , III			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025	
Mailing Address 3620 WILLOWWICK RD			FEC Identification Number C	
City HOUSTON	State TX	Zip Code 77019	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement CONTRIBUTION REFUND		Category/ Type	Transaction ID : SB20.3000	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	10500.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 24	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial) A. CARLTON, C, CRAIG, ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 6207 BEE CAVES RD STE 320		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78746
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 3500.00
Candidate Name		Transaction ID : SB20.3003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. CHILDS, JOHN, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 165 SAGO PALM RD		FEC Identification Number C
City VERO BEACH	State FL	Zip Code 32963
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 3300.00
Candidate Name		Transaction ID : SB20.3011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. FARMER, GARY, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 3148 ABOVE STRATFORD PL		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78746
Purpose of Disbursement CONTRIBUTION REFUND		Amount of Each Disbursement this Period 3500.00
Candidate Name		Transaction ID : SB20.3004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	10300.00
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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial)
A. HOCK, STACEY, , ,

Mailing Address 3331 WEST LAKE DR

City AUSTIN State TX Zip Code 78746

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 3500.00

Transaction ID : SB20.3006

Memo Item

Full Name (Last, First, Middle Initial)
B. MISCHER, WALTER, , ,

Mailing Address 9 GREENWAY PLAZA SUITE 2900

City HOUSTON State TX Zip Code 77046

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 3500.00

Transaction ID : SB20.3010

Memo Item

Full Name (Last, First, Middle Initial)
C. NAU, JOHN, , , III

Mailing Address PO BOX 2743

City HOUSTON State TX Zip Code 77252

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 03 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 3500.00

Transaction ID : SB20.3009

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 10500.00

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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial)

A. SMITH, THOMAS, , ,

Date of Disbursement

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

Mailing Address 5619 BORDLEY DR

FEC Identification Number

C

City HOUSTON State TX Zip Code 77058

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement CONTRIBUTION REFUND

Transaction ID : SB20.3008

Candidate Name

Memo Item

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

B. WEEKLEY, RICHARD, , ,

Date of Disbursement

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

Mailing Address 1111 NORTH POST OAK RD

FEC Identification Number

C

City HOUSTON State TX Zip Code 77055

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement CONTRIBUTION REFUND

Transaction ID : SB20.3005

Candidate Name

Memo Item

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: District:

Full Name (Last, First, Middle Initial)

C. YALAMANCHILI, CHOWDARY, , ,

Date of Disbursement

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

Mailing Address 11204 CYPRESS CT

FEC Identification Number

C

City HOUSTON State TX Zip Code 77065

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement CONTRIBUTION REFUND

Transaction ID : SB20.3007

Candidate Name

Memo Item

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: District:

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

10500.00

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 Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 24			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
McCaul for Congress

Full Name (Last, First, Middle Initial) A. CLANTON, JOHN, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2026		
Mailing Address 8944 STEEP HOLLOW RD					
City BRYAN	State TX	Zip Code 77808	FEC Identification Number C		
Purpose of Disbursement CONTRIBUTION REFUND			Amount of Each Disbursement this Period 1500.00		
Candidate Name			Transaction ID : SB20.3012		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>		
State: District:					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name			Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address					
City	State	Zip Code	FEC Identification Number C		
Purpose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name			Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	43300.00

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **McCaul for Congress** Transaction ID : **SC10.6830**

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
MCCAUL, MICHAEL, , ,		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 815 BRAZOS ST STE A PMB 230		
City AUSTIN	State TX	ZIP Code 78701-2514
<input checked="" type="checkbox"/> Personal Funds of the Candidate		

Original Amount of Loan 25800.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25800.00
-------------------------------------	------------------------------------	---

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 31 / 2025	M M / D D / Y Y Y Y ON DEMAND	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	25800.00
TOTALS This Period (last page in this line only).....▶	25800.00

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