

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

HARP FOR CONGRESS

ADDRESS (number and street)

PO BOX 5933

Check if different
than previously
reported. (ACC)

GAINESVILLE

FL

32672

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00903013

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

03

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

01

Y Y Y Y

2026

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2026

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

Type or Print Name of Treasurer GABRIEL, KEITH, , ,

Signature of Treasurer

GABRIEL, KEITH, , ,

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

14

Y Y Y Y

2026

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

HARP FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026

	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))....	10167.21	21414.63
(b) Total Contribution Refunds (from Line 20(d))	0.00	2.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	10167.21	21412.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8869.72	18619.74
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	274.92
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8869.72	18344.82
8. Cash on Hand at Close of Reporting Period (from Line 27).....	3027.81	
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)	735.00	

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

HARP FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026**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).....

5510.12

9210.12

(ii) Unitemized

4657.09

11784.51

(iii) TOTAL of contributions
from individuals ▶

10167.21

20994.63

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

420.00

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

10167.21

21414.63

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

735.00

(b) All Other Loans.....

0.00

0.00

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

0.00

735.00

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

0.00

274.92

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)..... ▶

10167.21

22424.55

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.....

8869.72

18619.74

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

2.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

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

0.00

2.00

21. OTHER DISBURSEMENTS

75.00

775.00

22. **TOTAL DISBURSEMENTS**

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

8944.72

19396.74

III. CASH SUMMARY

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

1805.32

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

10167.21

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

11972.53

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

8944.72

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

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

3027.81

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 33

☒ 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)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

Barker, Rosanna, , ,

A. Mailing Address 11379 Sw 57Th Ave

City
Ocala

State
FL

Zip Code
34476-9589

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

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
01 24 2026

Transaction ID : SA11AI.4743

Amount of Each Receipt this Period

50.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

B. Mailing Address PO BOX 441146

City
SOMERVILLE

State
MA

Zip Code
02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8780.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 24 2026

Transaction ID : SA11AI.4743.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Barker, Rosanna, , ,

C. Mailing Address 11379 Sw 57Th Ave

City
Ocala

State
FL

Zip Code
34476-9589

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

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 24 2026

Transaction ID : SA11AI.4737

Amount of Each Receipt this Period

50.00

☐ Memo Item

Contribution earmarked through ActBlue

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

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

100.00

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

Use separate schedule(s)
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PAGE 6 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10569.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 24 2026

Transaction ID : SA11AI.4737.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Barker, Rosanna, , ,

B.

Mailing Address 11379 Sw 57Th Ave

City

Ocala

State

FL

Zip Code

34476-9589

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

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 24 2026

Transaction ID : SA11AI.4695

Amount of Each Receipt this Period

50.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

12042.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 24 2026

Transaction ID : SA11AI.4695.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

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

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

50.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

Delgado Villalta, Silvia, , ,

A.

Mailing Address 1220 SW 11TH AVE D403

City

Gainesville

State

FL

Zip Code

32601

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Florida

Occupation

MD

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 07 2026

Transaction ID : SA11AI.4806

Amount of Each Receipt this Period

15.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

9617.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 07 2026

Transaction ID : SA11AI.4806.0

Amount of Each Receipt this Period

15.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Delgado Villalta, Silvia, , ,

C.

Mailing Address 1220 SW 11TH AVE D403

City

Gainesville

State

FL

Zip Code

32601

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Florida

Occupation

MD

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 07 2026

Transaction ID : SA11AI.4795

Amount of Each Receipt this Period

15.00

☐ Memo Item

Contribution earmarked through ActBlue

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

30.00

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

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11189.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 07 2026

Transaction ID : SA11AI.4795.0

Amount of Each Receipt this Period

15.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Greene, Gary, , ,

B.

Mailing Address 11384 Sw 78Th Circle

City

Ocala

State

FL

Zip Code

34476-9327

FEC ID number of contributing
federal political committee.

C

Name of Employer

yorkspeak llc

Occupation

Manager

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
01 26 2026

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period

100.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8880.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 26 2026

Transaction ID : SA11AI.4747.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

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

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

100.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

Greene, Gary, , ,

A. Mailing Address 11384 Sw 78Th Circle

City
Ocala

State
FL

Zip Code
34476-9327

FEC ID number of contributing
federal political committee.

C

Name of Employer
yorkspeach llc

Occupation
Manager

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 26 2026

Transaction ID : SA11AI.4739

Amount of Each Receipt this Period

100.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

B. Mailing Address PO BOX 441146

City
SOMERVILLE

State
MA

Zip Code
02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10674.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 26 2026

Transaction ID : SA11AI.4739.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Greene, Gary, , ,

C. Mailing Address 11384 Sw 78Th Circle

City
Ocala

State
FL

Zip Code
34476-9327

FEC ID number of contributing
federal political committee.

C

Name of Employer
yorkspeach llc

Occupation
Manager

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 26 2026

Transaction ID : SA11AI.4704

Amount of Each Receipt this Period

100.00

☐ Memo Item

Contribution earmarked through ActBlue

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

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

200.00

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

Use separate schedule(s)
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(check only one)

PAGE 10 OF 33

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

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12454.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 26 2026

Transaction ID : SA11AI.4704.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Horky, Susan, , ,

B.

Mailing Address 4724 Nw 57Th Drive

City

Gainesville

State

FL

Zip Code

32606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 26 2026

Transaction ID : SA11AI.4709

Amount of Each Receipt this Period

200.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12354.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 26 2026

Transaction ID : SA11AI.4709.0

Amount of Each Receipt this Period

200.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

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

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

200.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
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PAGE 11 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kaster, Bruce, , ,

A.

Mailing Address 621 E 12th Ave, PH

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kaster & Lynch PA

Occupation

Attorney

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
01 19 2026

Transaction ID : SA11AI.4961

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kaster, Susan, , ,

B.

Mailing Address 621 E 12th Ave, PH

City

Ocala

State

FL

Zip Code

34471

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

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
01 19 2026

Transaction ID : SA11AI.4960

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kerensky, Rachel, , ,

C.

Mailing Address 8605 Sw 28Th Lane False

City

Gainesville

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Independent Contractor

Occupation

Realtor

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 26 2026

Transaction ID : SA11AI.4717

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution earmarked through ActBlue

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

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

3250.00

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

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FOR LINE NUMBER:
(check only one)

PAGE 12 OF 33

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

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13578.63

Date of Receipt

M M / D D / Y Y Y Y
03 26 2026

Transaction ID : SA11AI.4717.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Loughlin, Sheila, , ,

B.

Mailing Address 7027 Sw 97Th Terrace Rd

City

Ocala

State

FL

Zip Code

34481

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.48

Date of Receipt

M M / D D / Y Y Y Y
03 14 2026

Transaction ID : SA11AI.4766

Amount of Each Receipt this Period

25.12

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11786.04

Date of Receipt

M M / D D / Y Y Y Y
03 14 2026

Transaction ID : SA11AI.4766.0

Amount of Each Receipt this Period

25.12

☒ Memo Item

Total earmarked through conduit. Limit not affected

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

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

25.12

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

Martin, William, , ,

A.

Mailing Address 2737 Nw 58 Blvd

City

Gainesville

State

FL

Zip Code

32606

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

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 26 2026

Transaction ID : SA11AI.4713

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13228.63

Date of Receipt

M M / D D / Y Y Y Y Y
03 26 2026

Transaction ID : SA11AI.4713.0

Amount of Each Receipt this Period

500.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Meyn, William, , ,

C.

Mailing Address 1035 Mangrove Lane

City

Alameda

State

CA

Zip Code

94502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Government

Occupation

Planner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 08 2026

Transaction ID : SA11AI.4692

Amount of Each Receipt this Period

50.00

☐ Memo Item

Contribution earmarked through ActBlue

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)
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FOR LINE NUMBER:
(check only one)

PAGE 14 OF 33

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Election Cycle-to-Date ▼

7892.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 08 2026

Transaction ID : SA11AI.4692.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Meyn, William, , ,

B.

Mailing Address 1035 Mangrove Lane

City

Alameda

State

CA

Zip Code

94502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Government

Planner

Receipt For: 2026



Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 10 2026

Transaction ID : SA11AI.4781

Amount of Each Receipt this Period

50.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Election Cycle-to-Date ▼

9684.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 10 2026

Transaction ID : SA11AI.4781.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

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

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

50.00

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

Use separate schedule(s)
for each category of the
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PAGE 15 OF 33

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

Meyn, William, , ,

A. Mailing Address 1035 Mangrove Lane

City
Alameda

State
CA

Zip Code
94502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Government

Occupation
Planner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 07 2026

Transaction ID : SA11AI.4796

Amount of Each Receipt this Period

50.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

B. Mailing Address PO BOX 441146

City
SOMERVILLE

State
MA

Zip Code
02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11174.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 07 2026

Transaction ID : SA11AI.4796.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Nesbit, Richard, , ,

C. Mailing Address 27431 N County Road 1491

City
Alachua

State
FL

Zip Code
32615

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alta Print

Occupation
Printer

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
01 06 2026

Transaction ID : SA11AI.4689

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution earmarked through ActBlue

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

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

300.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7817.42

Date of Receipt

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

Transaction ID : SA11AI.4689.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Scafuti, Annette, , ,

B.

Mailing Address 9425 Sw 31St Lane

City

Gainesville

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

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 2026

Transaction ID : SA11AI.4741

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10924.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 26 2026

Transaction ID : SA11AI.4741.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

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

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

250.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)
Severance, Elizabeth, , ,

A. Mailing Address 22540 Ne 112Th Ter

City
Fort Mccoy

State
FL

Zip Code
32134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shands

Occupation
Nurse

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11AI.4835

Amount of Each Receipt this Period

35.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)
ACTBLUE

B. Mailing Address PO BOX 441146

City
SOMERVILLE

State
MA

Zip Code
02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7567.42

Date of Receipt

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

Transaction ID : SA11AI.4835.0

Amount of Each Receipt this Period

35.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)
Severance, Elizabeth, , ,

C. Mailing Address 22540 Ne 112Th Ter

City
Fort Mccoy

State
FL

Zip Code
32134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shands

Occupation
Nurse

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 01 2026

Transaction ID : SA11AI.4792

Amount of Each Receipt this Period

35.00

☐ Memo Item

Contribution earmarked through ActBlue

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

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

70.00

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

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

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(check only one)

PAGE 18 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

9292.80

Date of Receipt

M M / D D / Y Y Y Y Y
02 01 2026

01

2026

Transaction ID : SA11AI.4792.0

Amount of Each Receipt this Period

35.00



Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Severance, Elizabeth, , ,

B.

Mailing Address 22540 Ne 112Th Ter

City

Fort Mccoy

State

FL

Zip Code

32134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Shands

Nurse

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 01 2026

01

2026

Transaction ID : SA11AI.4770

Amount of Each Receipt this Period

35.00



Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10991.92

Date of Receipt

M M / D D / Y Y Y Y Y
03 01 2026

01

2026

Transaction ID : SA11AI.4770.0

Amount of Each Receipt this Period

35.00



Memo Item

Total earmarked through conduit. Limit not affected

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

35.00

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

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

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

Spiess, Daniel, , ,

A.

Mailing Address 4642 Nw 12Th Pl

City

Gainesville

State

FL

Zip Code

32605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not employed

Occupation

Not employed

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 19 2026

Transaction ID : SA11AI.4746

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

B.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10384.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 19 2026

Transaction ID : SA11AI.4746.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Wade, Homer, , ,

C.

Mailing Address 14904 Ne 143Rd Terrace

City

Waldo

State

FL

Zip Code

32694

FEC ID number of contributing
federal political committee.

C

Name of Employer

Markey Wealth Management

Occupation

Financial Planner

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 13 2026

Transaction ID : SA11AI.4753

Amount of Each Receipt this Period

25.00

☐ Memo Item

Contribution earmarked through ActBlue

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

275.00

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

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

Use separate schedule(s)
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HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9799.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 13 2026

Transaction ID : SA11AI.4753.0

Amount of Each Receipt this Period

25.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

Full Name (Last, First, Middle Initial)

Wade, Homer, , ,

B.

Mailing Address 14904 Ne 143Rd Terrace

City

Waldo

State

FL

Zip Code

32694

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Markey Wealth Management

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 Y Y
03 13 2026

Transaction ID : SA11AI.4764

Amount of Each Receipt this Period

25.00

☐ Memo Item

Contribution earmarked through ActBlue

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address PO BOX 441146

City

SOMERVILLE

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11750.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 13 2026

Transaction ID : SA11AI.4764.0

Amount of Each Receipt this Period

25.00

☒ Memo Item

Total earmarked through conduit. Limit not affected

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

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

25.00

5510.12

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.39

Transaction ID : SB17.5010

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

12.86

Transaction ID : SB17.5011

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6.22

Transaction ID : SB17.5012

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

20.47

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

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

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

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

8.41

Transaction ID : SB17.5013

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

7.71

Transaction ID : SB17.5014

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.88

Transaction ID : SB17.5015

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

26.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.97

Transaction ID : SB17.5016

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

10.37

Transaction ID : SB17.5017

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

13.84

Transaction ID : SB17.5018

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

27.18

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7.90

Transaction ID : SB17.5019

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1.00

Transaction ID : SB17.5020

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6.23

Transaction ID : SB17.5021

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

15.13

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

13.06

Transaction ID : SB17.5022

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

11.07

Transaction ID : SB17.5023

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.95

Transaction ID : SB17.5024

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

28.08

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

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

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

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.40

Transaction ID : SB17.5025

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2.67

Transaction ID : SB17.5026

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.28

Transaction ID : SB17.5027

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

25.35

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 27 OF 33

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

13.10

Transaction ID : SB17.5028

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

10.71

Transaction ID : SB17.5029

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2.39

Transaction ID : SB17.5030

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

26.20

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

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

PAGE 28 OF 33

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

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4.20

Transaction ID : SB17.5031

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.97

Transaction ID : SB17.5032

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

65.68

Transaction ID : SB17.5033

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

7	2	.	8	5

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

PAGE 29 OF 33

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

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4.84

Transaction ID : SB17.5034

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 962017

City
BostonState
MAZip Code
02196Purpose of Disbursement
Payment Processing Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3.94

Transaction ID : SB17.5035

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon

Mailing Address 410 Terry Ave N

City
SeattleState
WAZip Code
98109Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

24.67

Transaction ID : SB17.4997

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

33.45

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

HARP 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	3		1	9		2	0	2	6

City
SeattleState
WAZip Code
98109

FEC Identification Number

C

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

18.17

Transaction ID : SB17.4998

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Ascent Trail Solutions

Mailing Address 5800 Beach Blvd., STE 203-337

Date of Disbursement

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

City
JacksonvilleState
FLZip Code
32207

FEC Identification Number

C

Purpose of Disbursement
Accounting and Compliance Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1538.00

Transaction ID : SB17.4984

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Ascent Trail Solutions

Mailing Address 5800 Beach Blvd., STE 203-337

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	6

City
JacksonvilleState
FLZip Code
32207

FEC Identification Number

C

Purpose of Disbursement
Accounting and Compliance Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1538.00

Transaction ID : SB17.4985

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

3094.17

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

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

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ascent Trail Solutions

Mailing Address 5800 Beach Blvd., STE 203-337

City
JacksonvilleState
FLZip Code
32207Purpose of Disbursement
Accounting and Compliance Services

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1538.00

Transaction ID : SB17.4986

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ascent Trail Solutions

Mailing Address 5800 Beach Blvd., STE 203-337

City
JacksonvilleState
FLZip Code
32207Purpose of Disbursement
Accounting and Compliance Services

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1538.00

Transaction ID : SB17.4987

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marion County Democratic Party

Mailing Address 970 SW 6th Ave

City
OcalaState
FLZip Code
34471Purpose of Disbursement
Event Tickets - Voter Outreach

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

305.00

Transaction ID : SB17.4994

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

3381.00

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

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

PAGE 32 OF 33

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

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NAME OF COMMITTEE (In Full)

HARP FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marion County Democratic Party

Mailing Address 970 SW 6th Ave

City
OcalaState
FLZip Code
34471Purpose of Disbursement
Event Sponsor

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

85.00

Transaction ID : SB17.4993

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Joe Dye Group

Mailing Address 100 Magnolia St

City
JacksonvilleState
FLZip Code
32204Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4996

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1585.00

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

8334.88

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

PAGE 33 OF 33

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4675

HARP FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARP, SETH ALLAN, , ,

Mailing Address

1122 NE 21ST AVE

City

GAINESVILLE

State

FL

ZIP Code

32611

☒ Personal Funds of the Candidate

Original Amount of Loan

735.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

735.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 31 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

735.00

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

735.00

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