

**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

MCCONNELL SENATE COMMITTEE

ADDRESS (number and street)

PO BOX 1496



Check if different than previously reported. (ACC)

LOUISVILLE

KY

40201-1496

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00193342

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

KY

00

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

10 / 01 / 2025

through

M M / D D / Y Y Y Y

12 / 31 / 2025

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

Type or Print Name of Treasurer LISKER, LISA, , ,

Signature of Treasurer

LISKER, LISA, , ,

Date

M M / D D / Y Y Y Y

01 / 30 / 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

MCCONNELL SENATE COMMITTEE

Report Covering the Period:

From:

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

To:

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

	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))....	0.00	14670547.35
(b) Total Contribution Refunds (from Line 20(d))	0.00	1794501.94
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	12876045.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	35263.12	13498842.83
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	312670.51
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	35263.12	13186172.32
8. Cash on Hand at Close of Reporting Period (from Line 27).....	7279082.63	
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)	0.00	

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

MCCONNELL SENATE COMMITTEE

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**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

7322732.87

(ii) Unitemized

0.00

6582262.11

(iii) TOTAL of contributions
from individuals ▶

0.00

13904994.98

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

765552.37

(d) The Candidate

0.00

0.00

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

0.00

14670547.35

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

570860.10

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

312670.51

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

61393.11

76966.15

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

61393.11

15631044.11

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.....	35263.12	13498842.83
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	1546239.57
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	248262.37
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1794501.94
21. OTHER DISBURSEMENTS	0.00	157225.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35263.12	15450569.77

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7252952.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	61393.11
25. SUBTOTAL (add Line 23 and Line 24).....	7314345.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35263.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7279082.63

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 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

REPUBLIC BANK AND TRUST COMPANY

A. Mailing Address 601 W MARKET ST

City
LOUISVILLE

State
KY

Zip Code
40202-2745

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

27735.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 17 2025

Transaction ID : AABDF08124BF9471EBF7

Amount of Each Receipt this Period

12162.06

☐ Memo Item

INTEREST INCOME

Full Name (Last, First, Middle Initial)

REPUBLIC BANK AND TRUST COMPANY

B. Mailing Address 601 W MARKET ST

City
LOUISVILLE

State
KY

Zip Code
40202-2745

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

35893.19

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 28 2025

Transaction ID : A2FDDF5E1BF214F639AD

Amount of Each Receipt this Period

8158.09

☐ Memo Item

INTEREST INCOME

Full Name (Last, First, Middle Initial)

REPUBLIC BANK AND TRUST COMPANY

C. Mailing Address 601 W MARKET ST

City
LOUISVILLE

State
KY

Zip Code
40202-2745

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

76966.15

Date of Receipt

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

Transaction ID : A65ADCCBE54B9411D902

Amount of Each Receipt this Period

21168.26

☐ Memo Item

INTEREST INCOME

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

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

41488.41

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

PAGE 6 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

REPUBLIC BANK AND TRUST COMPANY**A.** Mailing Address 601 W MARKET STCity
LOUISVILLEState
KYZip Code
40202-2745

Date of Receipt

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

Transaction ID : AAF8C040434D0488FB54

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

55797.89

Amount of Each Receipt this Period

19904.70

☐ Memo Item
INTEREST INCOME

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period

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

19904.70

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

61393.11

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

PAGE 7 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address PO BOX 8999

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94128-8999

FEC Identification Number

C

Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

24.95

Transaction ID : BC1B51AB616534DAA807

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 1909 K ST NW

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20006-1152

FEC Identification Number

C

Purpose of Disbursement
MERCHANT FEESCategory/
Type

Amount of Each Disbursement this Period

94.90

Transaction ID : B7A4ED85935C94CB784B

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. REPUBLIC BANK AND TRUST COMPANY

Mailing Address 601 W MARKET ST

Date of Disbursement

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

City
LOUISVILLEState
KYZip Code
40202-2745

FEC Identification Number

C

Purpose of Disbursement
BANK CHARGE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20.00

Transaction ID : BCE23F7EC3323477C8A3

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

139.85

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 8 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1909 K ST NW

City
WASHINGTONState
DCZip Code
20006-1152Purpose of Disbursement
BANK CHARGE

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
1	0		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

26.82

Transaction ID : BDDDB28222C0554F418DC

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO BOX 6463

City
CAROL STREAMState
ILZip Code
60197-6463Purpose of Disbursement
CELL PHONE

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
1	0		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

478.54

Transaction ID : B9577646826DB42EBB8F

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VERIZON WIRELESS

Mailing Address PO BOX 25505

City
LEHIGH VALLEYState
PAZip Code
18002-5505Purpose of Disbursement
CELL PHONE

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
1	0		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1545.73

Transaction ID : B66E4963B530D46FA8CB

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

2051.09

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 9 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. GENERAL DYNAMICSMailing Address 1201 M ST SE
STE 100City
WASHINGTONState
DCZip Code
20003-3708Purpose of Disbursement
EVENT SITE RENTAL

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B0030D86ECC99435F961

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AUTHORIZE.NET

Mailing Address PO BOX 8999

City
SAN FRANCISCOState
CAZip Code
94128-8999Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.95

Transaction ID : B32C76E4BBC8648B6B03

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ARISTOTLE

Mailing Address PO BOX 716045

City
PHILADELPHIAState
PAZip Code
19171-6045Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9360.00

Transaction ID : B93D8A9D8AAE6469487F

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

9634.95

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 10 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1909 K ST NW

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20006-1152

FEC Identification Number

C

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

94.90

Transaction ID : B53ED91ABE18F4D6BBD7

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 1909 K ST NW

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20006-1152

FEC Identification Number

C

Purpose of Disbursement
BANK CHARGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

36.32

Transaction ID : B328319D7A36D4AED854

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO BOX 6463

Date of Disbursement

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

City
CAROL STREAMState
ILZip Code
60197-6463

FEC Identification Number

C

Purpose of Disbursement
CELL PHONE

Candidate Name

001
Category/
Type

Amount of Each Disbursement this Period

426.40

Transaction ID : BD4C190A2C33E4E9F8A2

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

557.62

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 11 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. REPUBLIC BANK AND TRUST COMPANY

Mailing Address 601 W MARKET ST

Date of Disbursement

M M	D D	Y Y Y Y
11	28	2025

City
LOUISVILLEState
KYZip Code
40202-2745

FEC Identification Number

C

Purpose of Disbursement
BANK CHARGE

001

Amount of Each Disbursement this Period

20.00

Transaction ID : BFAA953D309E44BFEA55

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. VERIZON WIRELESS

Mailing Address PO BOX 25505

Date of Disbursement

M M	D D	Y Y Y Y
12	01	2025

City
LEHIGH VALLEYState
PAZip Code
18002-5505

FEC Identification Number

C

Purpose of Disbursement
CELL PHONECategory/
Type

Amount of Each Disbursement this Period

1680.73

Transaction ID : BBE83379476F849FFABE

☐ Memo Item

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. AUTHORIZE.NET

Mailing Address PO BOX 8999

Date of Disbursement

M M	D D	Y Y Y Y
12	02	2025

City
SAN FRANCISCOState
CAZip Code
94128-8999

FEC Identification Number

C

Purpose of Disbursement
MERCHANT FEES

001

Amount of Each Disbursement this Period

24.95

Transaction ID : B12BDD4D40F76420C8CC

☐ Memo Item

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1725.68

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 12 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1909 K ST NW

City
WASHINGTONState
DCZip Code
20006-1152Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

109.90

Transaction ID : BF51F98F5E0B843B4A57

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 1909 K ST NW

City
WASHINGTONState
DCZip Code
20006-1152Purpose of Disbursement
BANK CHARGE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : B5B79EB1A44F04EE4B42

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address PO BOX 6463

City
CAROL STREAMState
ILZip Code
60197-6463Purpose of Disbursement
CELL PHONE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

432.52

Transaction ID : BB5700688688149E9A38

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

582.42

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 13 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. VERIZON WIRELESS

Mailing Address PO BOX 25505

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2025

City
LEHIGH VALLEYState
PAZip Code
18002-5505

FEC Identification Number

C

Purpose of Disbursement
CELL PHONE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2130.73

Transaction ID : BBDE3BDA51FD44DD1BC3

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. REPUBLIC BANK AND TRUST COMPANY

Mailing Address 601 W MARKET ST

Date of Disbursement

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

City
LOUISVILLEState
KYZip Code
40202-2745

FEC Identification Number

C

Purpose of Disbursement
BANK CHARGE

Candidate Name

001
Category/
Type

Amount of Each Disbursement this Period

20.00

Transaction ID : B4F68748B9DC74F69997

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLCMailing Address 45 N HILL DR
STE 100

Date of Disbursement

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

City
WARRENTONState
VAZip Code
20186-2678

FEC Identification Number

C

Purpose of Disbursement
LEGAL FEES

Candidate Name

001
Category/
Type

Amount of Each Disbursement this Period

3071.25

Transaction ID : BCA8C3E01D01743C099D

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

5221.98

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 14 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLCMailing Address 45 N HILL DR
STE 100City
WARRENTONState
VAZip Code
20186-2678Purpose of Disbursement
LEGAL FEES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

682.50

Transaction ID : B6512643ADDED44CE977

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HUCKABY DAVIS LISKER INC.

Mailing Address 228 S WASHINGTON ST

City
ALEXANDRIAState
VAZip Code
22314-5408Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

13498.83

Transaction ID : BE7AF5758FB8148E9A66

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FORCHT BANK VISA

Mailing Address PO BOX 4513

City
CAROL STREAMState
ILZip Code
60197-4513Purpose of Disbursement
CREDIT CARD PAYMENT- SEE MEMOS

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

110.40

Transaction ID : B729A2D9078814BD99C6

☐ Memo Item

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

14291.73

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 15 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. US SENATE

Mailing Address 2 CONSTITUTION AVE. NE

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20002

FEC Identification Number

C

Purpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

110.40

Transaction ID : B5A0F1CF134034181A44

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. FORCHT BANK VISA

Mailing Address PO BOX 4513

Date of Disbursement

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

City
CAROL STREAMState
ILZip Code
60197-4513

FEC Identification Number

C

Purpose of Disbursement
CREDIT CARD PAYMENT- SEE MEMOS

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

55.20

Transaction ID : B9265DCB6A8E44A91A3B

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. US SENATE

Mailing Address 2 CONSTITUTION AVE. NE

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20002

FEC Identification Number

C

Purpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

55.20

Transaction ID : BD57A98B17D684861800

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

55.20

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 16 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. FORCHT BANK VISA

Mailing Address PO BOX 4513

City
CAROL STREAMState
ILZip Code
60197-4513Purpose of Disbursement
CREDIT CARD PAYMENT- SEE MEMOS

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

552.60

Transaction ID : B881645D990FE49CEA70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address PO BOX 6463

City
CAROL STREAMState
ILZip Code
60197-6463Purpose of Disbursement
CELL PHONE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

164.21

Transaction ID : BC2861C9599A7468EAE0

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CHERYL'S FLORAL

Mailing Address 94 DOGWOOD HEIGHTS

City
INEZState
KYZip Code
41224Purpose of Disbursement
FLOWERS

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

120.00

Transaction ID : B0958E5AAED1A44D59BF

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

552.60

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 17 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. LLOYD'S FLORIST

Mailing Address 9216 PRESTON HWY

Date of Disbursement

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

City
LOUISVILLEState
KYZip Code
40229-1107

FEC Identification Number

CPurpose of Disbursement
FLOWERS

001

Amount of Each Disbursement this Period

119.99

Transaction ID : B3A21F54EEBFE4CDCAF4

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. LLOYD'S FLORIST

Mailing Address 9216 PRESTON HWY

Date of Disbursement

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

City
LOUISVILLEState
KYZip Code
40229-1107

FEC Identification Number

CPurpose of Disbursement
FLOWERS

001

Amount of Each Disbursement this Period

148.40

Transaction ID : B2EC15B5B50CD44CCA71

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. FORCHT BANK VISA

Mailing Address PO BOX 4513

Date of Disbursement

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

City
CAROL STREAMState
ILZip Code
60197-4513

FEC Identification Number

CPurpose of Disbursement
CREDIT CARD PAYMENT- SEE MEMOSCategory/
Type

Amount of Each Disbursement this Period

450.00

Transaction ID : B7AB78FEE532C44648B5

☐ Memo Item

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

450.00

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 18 OF 18

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

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NAME OF COMMITTEE (In Full)

MCCONNELL SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

A. XFINITY

Mailing Address 1701 JOHN F KENNEDY BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2025

City
PHILADELPHIAState
PAZip Code
19103-2833

FEC Identification Number

CPurpose of Disbursement
UTILITIES

001

Amount of Each Disbursement this Period

450.00

Transaction ID : B5C0053004A534BB593D

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

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

0.00

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

35263.12