

**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

SHREVE FOR CONGRESS

ADDRESS (number and street)

PO BOX 17182

Check if different
than previously
reported. (ACC)

SOUTHPORT

IN

46227

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00870949

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

IN

06

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 /

04

D D /

16

Y Y Y Y

2026

through

M M /

06

D D /

30

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

MARTIN, KEVIN, , ,

Signature of Treasurer

MARTIN, KEVIN, , ,

Date

M M /

07

D D /

09

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

SHREVE FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	6

To:

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

	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))	78613.30	430648.62
(b) Total Contribution Refunds (from Line 20(d))	10.67	4585.63
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	78602.63	426062.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	224767.79	1025331.01
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	977.93
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	224767.79	1024353.08
8. Cash on Hand at Close of Reporting Period (from Line 27)	1608234.89	
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)	3900000.00	

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

SHREVE FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 16 / 2026

To:

MM / DD / YYYY
06 / 30 / 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).....

17250.00

126428.71

(ii) Unitemized

363.30

2219.91

(iii) TOTAL of contributions
from individuals ▶

17613.30

128648.62

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

61000.00

302000.00

(d) The Candidate

0.00

0.00

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

78613.30

430648.62

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

8680.96

13. LOANS:

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

0.00

2000000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

2000000.00

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

0.00

977.93

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)..... ▶

78613.30

2440307.51

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.....	224767.79	1025331.01
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	10.67	85.63
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	4500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	10.67	4585.63
21. OTHER DISBURSEMENTS	1500.00	2000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	226278.46	1031916.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1755900.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	78613.30
25. SUBTOTAL (add Line 23 and Line 24).....	1834513.35
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	226278.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1608234.89

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3N

Transaction ID :

CANDIDATE HAS FORGIVEN TWO LOANS IN THE FULL AMOUNT OF \$500,000.00 ORIGINALLY INCURRED ON 3/11/2024 AND \$700,000 ORIGINALLY INCURRED ON 3/28/2024. CANDIDATE HAS FORGIVEN \$800,000 OF \$1,000,000 LOAN ORIGINALLY INCURRED ON 3/31/2024.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 72

☒ 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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN SENIOR COMMUNITIES LLC

A.

Mailing Address 6900 S. GRAY RD

City

INDIANAPOLIS

State

IN

Zip Code

46237-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 15 2026

Transaction ID : ADBB7B6F8CC62467F8C3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SEE PARTNERSHIP ATTRIBUTIONS

Full Name (Last, First, Middle Initial)

JACKSON, ETHAN, I., ,

B.

Mailing Address 6900 S GRAY RD

City

INDIANAPOLIS

State

IN

Zip Code

46237-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

PARTNER

AMERICAN SENIOR COMMUNITIES LLC

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

247.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 15 2026

Transaction ID : AFA55EDA84AEC44D59FC

Amount of Each Receipt this Period

247.29

☒ Memo Item

PARTNERSHIP: AMERICAN SENIOR COMMUNITIES LLC

Full Name (Last, First, Middle Initial)

JACKSON, MARK, A., ,

C.

Mailing Address 6900 S GRAY RD

City

INDIANAPOLIS

State

IN

Zip Code

46237-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

AMERICAN SENIOR COMMUNITIES LLC

PARTNER

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

288.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 15 2026

Transaction ID : A92C930E74D0A47A3B9F

Amount of Each Receipt this Period

288.50

☒ Memo Item

PARTNERSHIP: AMERICAN SENIOR COMMUNITIES LLC

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

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

1000.00

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

CARR, RANDI, S., ,

A.

Mailing Address 975 ARMOUR CIR

City

LAKE FOREST

State

IL

Zip Code

60045-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer

IGNITE MEDICAL RECORDS

Occupation

CHIEF OF STAFF

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 15 / 2026D D / Y Y Y Y Y
15 / 2026Y Y Y Y Y
2026

Transaction ID : A3D74986A25A4485AB80

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ENVIVE NURSING HOLDINGS LLC

B.

Mailing Address STE 123

City

CHICAGO

State

IL

Zip Code

60018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 15 / 2026D D / Y Y Y Y Y
15 / 2026Y Y Y Y Y
2026

Transaction ID : A7850FDE97F8C45EBBE4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

PARTNERSHIP ATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

FAISON, JAY, W., ,

C.Mailing Address 1355 GREENWOOD CLFS
STE 301

City

CHARLOTTE

State

NC

Zip Code

28204-2981

FEC ID number of contributing
federal political committee.

C

Name of Employer

CLEARPATH

Occupation

CEO

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2026D D / Y Y Y Y Y
11 / 2026Y Y Y Y Y
2026

Transaction ID : A945D84A6655C454BA49

Amount of Each Receipt this Period

3500.00

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

GREEN, RYAN, , ,

A.

Mailing Address 335 CRANBURY WAY

City

LOUISVILLE

State

KY

Zip Code

40245

FEC ID number of contributing
federal political committee.

C

Name of Employer

TRILOGY HEALTH SERVICES

Occupation

MANAGER, GOVERNMENT RELATIONS

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A8DE496D67EE040EBB9F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.Mailing Address 1603 CAPITOL AVE
STE 413B562

City

CHEYENNE

State

WY

Zip Code

82001-4569

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

42395.31

Date of Receipt

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

Transaction ID : AD62415AEAFD340B8906

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

HEADLEY, KATHY, , ,

C.

Mailing Address 2148 N MOUNT GILEAD RD

City

BLOOMINGTON

State

IN

Zip Code

47408

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARDON AND ASSOCIATES

Occupation

OWNER

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AEC92C16CFBA84BE690D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

2000.00

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

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESSFull Name (Last, First, Middle Initial)
WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

42395.31

Date of Receipt

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

Transaction ID : A125D5F8213C547D7ABC

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**B.**Full Name (Last, First, Middle Initial)
HOMEVIEW HEALTHCARE OPERATIONS COMPANY, LLC (HOMEVIEW CENTER OF FRANKLIN)

Mailing Address 651 S STATE ST

City
FRANKLINState
INZip Code
46131-2552FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA256AE54F4C2454787A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SEE PARTNERSHIP ATTRIBUTION

C.Full Name (Last, First, Middle Initial)
OTT, RYAN, M., ,

Mailing Address 1800 N WABASH RD

City
MARIONState
INZip Code
46952-1310FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
CEO

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A4AB4A27149B24E1EAAC

Amount of Each Receipt this Period

1000.00

☒ Memo ItemPARTNERSHIP: HOMEVIEW HEALTHCARE
OPERATIONS COMPANY, LLC (HOMEVIEW**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

KESSER GROUP LLC

A.

Mailing Address 4655 W CHASE AVE

City

LINCOLNWOOD

State

IL

Zip Code

60712-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		15		2026

Transaction ID : ABD9026F6A6BC430C844

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SEE PARTNERSHIP ATTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MEYSTEI, YOSEF, , ,

Mailing Address 4665 W CHASE AVE

City

LINCOLNWOOD

State

IL

Zip Code

60712-1605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

KESSER GROUP

FOUNDER

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		15		2026

Transaction ID : AFF148C21C02349E4AC4

Amount of Each Receipt this Period

1000.00

☒ Memo Item

PARTNERSHIP: KESSER GROUP LLC

C.

Full Name (Last, First, Middle Initial)

MAJESTIC MANAGEMENT LLC

Mailing Address 15813 72ND AVE
FL 2

City

FRESH MEADOWS

State

NY

Zip Code

11365-4100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		15		2026

Transaction ID : A30698AF7BA93407EB58

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SEE PARTNERSHIP ATTRIBUTION

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

2000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARX, DAVID, , ,

A.

Mailing Address 15813 72ND AVE

FL 2

City

FRESH MEADOWS

State

NY

Zip Code

11365-4100

FEC ID number of contributing
federal political committee.

C

Name of Employer
OWNER

Occupation

MAJESTIC MANAGEMENT LLC

Receipt For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A3C8414EF957C4258B42

Amount of Each Receipt this Period

1000.00

☒ Memo Item

PARTNERSHIP: MAJESTIC MANAGEMENT LLC

B.

Full Name (Last, First, Middle Initial)

MCCANNELL, CHRIS, , ,

Mailing Address 2100 11TH STREET NW

City

WASHINGTON

State

DC

Zip Code

20001-4016

FEC ID number of contributing
federal political committee.

C

Name of Employer
GRAYROBINSON

Occupation

DEPUTY MANAGING DIRECTOR

Receipt For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A9964AFBAB58042C1AEA

Amount of Each Receipt this Period

500.00

☐ Memo Item

SEE INTERMEDIARY

C.

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2604

FEC ID number of contributing
federal political committee.

C

C00797670

Name of Employer

Occupation

Receipt For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

Election Cycle-to-Date ▼

550.60

Date of Receipt

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

Transaction ID : AC2A7E1FC52DB46B4BCE

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

500.00

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

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

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

RIETHMILLER, JOEL, , ,

A.

Mailing Address 400 MASSACHUSETTS AVENUE NW 1312

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

IMPERIUM GLOBAL ADVISORS

Occupation

CONSULTANT

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID : A4F494DCB863D474BB4F

Amount of Each Receipt this Period

750.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

B.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 1603 CAPITOL AVE
STE 413B562

City

CHEYENNE

State

WY

Zip Code

82001-4569

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

42395.31

Date of Receipt

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

Transaction ID : A4414943244F84B1DAED

Amount of Each Receipt this Period

750.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

SEBBAG, GABRIEL, J., ,

Mailing Address 116 MEADE AVE

City

PASSAIC

State

NJ

Zip Code

07055-3717

FEC ID number of contributing
federal political committee.

C

Name of Employer

ADVANCED CARE CONSULTANTS

Occupation

PRESIDENT OF OPERATIONS

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AF05982791C3545B786C

Amount of Each Receipt this Period

1000.00

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

1750.00

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHAW, REBECCA, , ,

A.Mailing Address 1201 NEW YORK AVE NW
FL 9

City

WASHINGTON

State

DC

Zip Code

20005-3917

FEC ID number of contributing
federal political committee.

C

Name of Employer

AVOQ

Occupation

CONSULTANT

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2026

Transaction ID : A3EE62C6AE65644AB9F1

Amount of Each Receipt this Period

1500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

B.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 1603 CAPITOL AVE
STE 413B562

City

CHEYENNE

State

WY

Zip Code

82001-4569

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

42395.31

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2026

Transaction ID : AFED460DAF9854D3F91D

Amount of Each Receipt this Period

1500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

TANNER, YVONNE, , ,

Mailing Address 5920 MARINA VIEW DR

City

INDIANAPOLIS

State

IN

Zip Code

46237

FEC ID number of contributing
federal political committee.

C

Name of Employer

BRICKYARD HEALTHCARE

Occupation

RN

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A7D7D008EAFD942D0823

Amount of Each Receipt this Period

2000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

3500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESSFull Name (Last, First, Middle Initial)
WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

42395.31

Date of Receipt

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

Transaction ID : AF2B9D407741C492EBDA

Amount of Each Receipt this Period

2000.00

☒ Memo Item

INTERMEDIARY

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

Mailing Address 1 CASPIAN LN

City
BLUFFTONState
SCZip Code
29909FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

BGR

PRINCIPAL

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2026

Transaction ID : A588E10334D204552924

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.Full Name (Last, First, Middle Initial)
WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

42395.31

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		23		2026

Transaction ID : A40257EC28A934FBD50

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

500.00

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

17250.00

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

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALLIED PILOTS ASSOCIATION PAC

Mailing Address 14600 TRINITY BLVD

STE 500

City

FORT WORTH

State

TX

Zip Code

76155-2559

FEC ID number of contributing
federal political committee.

C C00267849

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2026

Transaction ID : A7C3D36FBDB8548048C5

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMALGAMATED SUGAR COMPANY PAC

Mailing Address 1951 S SATURN WAY

City

BOISE

State

ID

Zip Code

83709-2923

FEC ID number of contributing
federal political committee.

C C00326389

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 18 2026

Transaction ID : A728F59AEA3B9443AB82

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMAZON.COM SERVICES LLC SEPARATE SEGREGATED FUND (AMAZON PAC)

Mailing Address 601 NEW JERSEY AVE NW

STE 900

City

WASHINGTON

State

DC

Zip Code

20001-2027

FEC ID number of contributing
federal political committee.

C C00360354

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 16 2026

Transaction ID : A9F93A059E08841739CA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN DENTAL ASSOCIATION PAC

A.

Mailing Address 400 C ST NE

City

WASHINGTON

State

DC

Zip Code

20002-5818

FEC ID number of contributing
federal political committee.

C C00000729

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A331F0CD8C2C340E7A80

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN HEALTH CARE ASSOCIATION PAC

B.

Mailing Address 3723 GREENVILLE AVE
STE 41077

City

DALLAS

State

TX

Zip Code

75206-5311

FEC ID number of contributing
federal political committee.

C C00006080

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A6FCF42515AAA46A18E0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC

C.

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2604

FEC ID number of contributing
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5045.57

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	2	6

Transaction ID : A92BDF3DB74644144961

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

ASSOCIATED EQUIPMENT DISTRIBUTORS PACMailing Address 650 E ALGONQUIN RD
STE 305City
SCHAUMBURGState
ILZip Code
60173-3853FEC ID number of contributing
federal political committee.**C** C00010124

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2026

Transaction ID : ADA095A62D82145FD87B

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CARPENTERS LEGISLATIVE IMPROVEMENT COMMITTEEMailing Address 101 CONSTITUTION AVE NW
FL 10WESTCity
WASHINGTONState
DCZip Code
20001-2133FEC ID number of contributing
federal political committee.**C** C00001016

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		18		2026

Transaction ID : AC3B300553FBF4000AA8

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHARTER COMMUNICATIONS INC. PAC

Mailing Address 400 WASHINGTON BLVD

City
STAMFORDState
CTZip Code
06902-6641FEC ID number of contributing
federal political committee.**C** C00426775

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2026

Transaction ID : A523A630083CA4F4CB7A

Amount of Each Receipt this Period

1500.00

☐ Memo Item

7000.00

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

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

CONSERVATIVE OPPORTUNITY LEADERSHIP AND ENTERPRISE PAC - COLEPAC

A.

Mailing Address 12176 CHANCERY STATION CIR

City
RESTON

State
VA

Zip Code
20190-5803

FEC ID number of contributing
federal political committee.

C C00404392

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2026

Transaction ID : A26CC55EDB6AE4FDD9B2

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CUMMINS INC. PAC (CIPAC)

B.

Mailing Address 601 PENNSYLVANIA AVE NW
NORTH BUILDING SUITE 1100N

City
WASHINGTON

State
DC

Zip Code
20004-2601

FEC ID number of contributing
federal political committee.

C C00377952

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 18 2026

Transaction ID : ACC0386B76CD84145B9A

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELECTING MAJORITY MAKING EFFECTIVE REPUBLICANS PAC- EMMER PAC

C.

Mailing Address PO BOX 183

City
ANOKA

State
MN

Zip Code
55303-0027

FEC ID number of contributing
federal political committee.

C C00592089

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 28 2026

Transaction ID : A77445115E2C64AD8A6B

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

10000.00

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

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)

A.

Mailing Address 1001 PENNSYLVANIA AVE NW

STE 710

City

WASHINGTON

State

DC

Zip Code

20004-2513

FEC ID number of contributing
federal political committee.

C C00197228

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

9000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 06 2026

Transaction ID : A61445982114C47278CE

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)

B.

Mailing Address 1001 PENNSYLVANIA AVE NW

STE 710

City

WASHINGTON

State

DC

Zip Code

20004-2513

FEC ID number of contributing
federal political committee.

C C00197228

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

11000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 11 2026

Transaction ID : A49A4B76D0B8C46DF8E8

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EMMER FOR CONGRESS

C.

Mailing Address PO BOX 279

City

ELK RIVER

State

MN

Zip Code

55330-0279

FEC ID number of contributing
federal political committee.

C C00545749

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 28 2026

Transaction ID : A857E96DA01A24F25958

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

6500.00

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

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DR

City

FALLS CHURCH

State

VA

Zip Code

22042-4511

FEC ID number of contributing
federal political committee.**C** C00088591

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A02A87CE98E75438EBDC

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FAA MANAGERS ASSOCIATION INC. PACMailing Address 1015 ATLANTIC BLVD
STE 245

City

ATLANTIC BEACH

State

FL

Zip Code

32233-3313

FEC ID number of contributing
federal political committee.**C** C00366070

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : AF4115A60870A4169A96

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FAA MANAGERS ASSOCIATION INC. PACMailing Address 1015 ATLANTIC BLVD
STE 245

City

ATLANTIC BEACH

State

FL

Zip Code

32233-3313

FEC ID number of contributing
federal political committee.**C** C00366070

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A21E21358A60F409F952

Amount of Each Receipt this Period

1000.00

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

3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL PACMailing Address 101 CONSTITUTION AVE NW
STE 500City
WASHINGTONState
DCZip Code
20001-2133FEC ID number of contributing
federal political committee.**C** C00096156

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2026

Transaction ID : ABB51D04F909649B185B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MOTOROLA SOLUTIONS, INC. PACMailing Address 601 PENNSYLVANIA AVE NW
STE 675City
WASHINGTONState
DCZip Code
20004-2601FEC ID number of contributing
federal political committee.**C** C00075341

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		05		2026

Transaction ID : A749DD8ACBA104F1A9A4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL AUTOMOBILE DEALERS ASSOCIATION PACMailing Address 8484 WESTPARK DR
STE 500City
TYSONSState
VAZip Code
22102-3588FEC ID number of contributing
federal political committee.**C** C00040998

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		05		2026

Transaction ID : AB0207DAE1B1D479EA2B

Amount of Each Receipt this Period

5000.00

☐ Memo Item

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATSO INC. NATSO PAC

A.

Mailing Address 1330 BRADDOCK PL

STE 501

City

ALEXANDRIA

State

VA

Zip Code

22314-1650

FEC ID number of contributing
federal political committee.

C C00097865

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2026

Transaction ID : A6E5EDECB101F4608BB4

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NETJETS INC. PAC

B.

Mailing Address 4111 BRIDGEWAY AVE

City

COLUMBUS

State

OH

Zip Code

43219-1882

FEC ID number of contributing
federal political committee.

C C00481309

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 02 2026

Transaction ID : ADC5FE68409E649DE9CB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

C.

Mailing Address 6363 OAK TREE BLVD

City

INDEPENDENCE

State

OH

Zip Code

44131-2556

FEC ID number of contributing
federal political committee.

C C00082271

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 05 2026

Transaction ID : ACC06F55DDDE94AC7899

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

4500.00

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

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

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☐ 11a	☐ 11b	☒ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROLLS-ROYCE NORTH AMERICA HOLDINGS INC. PAC (ROLLS-ROYCE NORTH AMERICA PAC)

A.Mailing Address 1900 RESTON METRO PLZ
STE 400City
RESTONState
VAZip Code
20190-5950FEC ID number of contributing
federal political committee.**C** C00296822

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2026

Transaction ID : A8A57498B591D4329AE7

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

RVFPAC

Mailing Address 824 S MILLEDGE AVE
STE 101City
ATHENSState
GAZip Code
30606FEC ID number of contributing
federal political committee.**C** C00689208

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2026

Transaction ID : AB75EC86FFF35448A981

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SCIENCE APPLICATIONS INTERNATIONAL CORPORATION VOLUNTARY PAC

Mailing Address 12010 SUNSET HILLS RD

City
RESTONState
VAZip Code
20190-5856FEC ID number of contributing
federal political committee.**C** C00300418

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		02		2026

Transaction ID : A783706EF3B50442CBD9

Amount of Each Receipt this Period

1000.00

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

5000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 11a	☐ 11b	☒ 11c	☐ 11d
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			15

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES PILOTS ASSOCIATION PAC (SWAPA PAC)

Mailing Address 5221 N O CONNOR BLVD

STE 500

City

IRVING

State

TX

Zip Code

75039-3753

FEC ID number of contributing
federal political committee.**C** C00360669

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2026

Transaction ID : A2FEE29ED74E04F3F8EB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TEXTRON INC. PAC

Mailing Address 40 WESTMINSTER ST

City

PROVIDENCE

State

RI

Zip Code

02903-2524

FEC ID number of contributing
federal political committee.**C** C00123612

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		27		2026

Transaction ID : A29A18F5B065E4AD8892

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE COUNCIL OF INSURANCE AGENTS & BROKERS PAC

Mailing Address 701 PENNSYLVANIA AVE NW

STE 750

City

WASHINGTON

State

DC

Zip Code

20004-2661

FEC ID number of contributing
federal political committee.**C** C00039578

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2026

Transaction ID : AFC03366658BA49B498E

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

UNITED AIRLINES, INC. PAC (UAPAC)

A.

Mailing Address 233 S WACKER DR

HDQGV - 15TH FL.

City

CHICAGO

State

IL

Zip Code

60606-6311

FEC ID number of contributing
federal political committee.

C C00101766

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	6

Transaction ID : AD4AE19FA44304693837

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

1000.00

61000.00

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. 323INK

Mailing Address 2818 SABLE MILL RD

Date of Disbursement

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

City
JEFFState
INZip Code
47130-9247

FEC Identification Number

C

Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

248.63

Transaction ID : BB2D77D9C3B674C8B9F4

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. ADOBE

Mailing Address 345 PARK AVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	6

City
SAN JOSEState
CAZip Code
95110-2704

FEC Identification Number

C

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

32.09

Transaction ID : B3E72515D9BA845849BD

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. ADOBE

Mailing Address 345 PARK AVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	6

City
SAN JOSEState
CAZip Code
95110-2704

FEC Identification Number

C

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

32.09

Transaction ID : BD43E245A5ABB4D87AC5

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

312.81

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
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ADOBE

Mailing Address 345 PARK AVE

City
SAN JOSEState
CAZip Code
95110-2704Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

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	6		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

32.09

Transaction ID : B87181C0940214B3BA1A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

City
FORT WORTHState
TXZip Code
76155-1801Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

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	4		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

597.81

Transaction ID : BEBCD7CF2D6F14250839

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ARISTOTLE INTERNATIONAL, INC.

Mailing Address PO BOX 716045

City
PHILADELPHIAState
PAZip Code
19171-6045Purpose of Disbursement
COMPLIANCE SOFTWARE

001

Candidate Name

Category/
Type

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	6		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : B1EBA0A9427F24C83A61

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

2879.90

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ASPIRE JOHNSON COUNTYMailing Address 1499 WINDHORST WAY
STE 160City
GREENWOODState
INZip Code
46143-8800Purpose of Disbursement
EVENT TICKETS/SPONSORSHIP

001

Candidate Name

Category/
Type

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	4		1	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

46.69

Transaction ID : B98177E5CD10F4061BAF

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BARTHOLOMEW COUNTY REPUBLICAN PARTY

Mailing Address PO BOX 1723

City
COLUMBUSState
INZip Code
47202-1723Purpose of Disbursement
EVENT SPONSORSHIP

001

Candidate Name

BARTHOLOMEW COUNTY REPUBLICAN PARTY

Category/
Type

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	4		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B153FFFD70D844EE3A95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BARTHOLOMEW COUNTY REPUBLICAN PARTY

Mailing Address PO BOX 1723

City
COLUMBUSState
INZip Code
47202-1723Purpose of Disbursement
SPONSORSHIP

001

Candidate Name

BARTHOLOMEW COUNTY REPUBLICAN PARTY

Category/
Type

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	5		2	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

505.00

Transaction ID : B708AA1AC22874251BF3

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

1551.69

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BOB EVANS

Mailing Address 8200 WALTON PKWY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	6

City
NEW ALBANYState
OHZip Code
43054-7687

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

002

Amount of Each Disbursement this Period

53.57

Transaction ID : B85F4E56B0B5F4508B42

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. BROGHAMER COMPLIANCE

Mailing Address PO BOX 72100

Date of Disbursement

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

City
NEWPORTState
KYZip Code
41072-0100

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Amount of Each Disbursement this Period

4253.65

Transaction ID : B846709FF971F466299F

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. BROGHAMER COMPLIANCE

Mailing Address PO BOX 72100

Date of Disbursement

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

City
NEWPORTState
KYZip Code
41072-0100

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Amount of Each Disbursement this Period

2477.94

Transaction ID : B52D37F01B19A4AAB97C

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

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

6785.16

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
FOOD/BEVERAGE

002

Candidate Name

Category/
Type

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	4		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

245.09

Transaction ID : BFB2871BC3E77499A8D9

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
FOOD/BEVERAGE

002

Candidate Name

Category/
Type

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	5		1	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

240.40

Transaction ID : B3F9E8E32E2744FED860

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
FOOD/BEVERAGE

002

Candidate Name

Category/
Type

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	6		1	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

707.04

Transaction ID : BF9384B22662E4DD0A69

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

1192.53

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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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CONDOLENCES SYMPATHY GIFTSMailing Address 2326 WASHINGTON BLVD
#303City
OGDENState
UTZip Code
84401-1435Purpose of Disbursement
BEREAVEMENT FLOWERS

001

Candidate Name

Category/
Type

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	5		2	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

137.47

Transaction ID : BCAB6D3A2BCF546E6A0D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONGRESSIONAL LIQUOR STORE

Mailing Address 404 1ST ST SE

City
WASHINGTONState
DCZip Code
20003-1826Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

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	4		2	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

226.03

Transaction ID : B201B339631BD4080A29

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONGRESSIONAL LIQUOR STORE

Mailing Address 404 1ST ST SE

City
WASHINGTONState
DCZip Code
20003-1826Purpose of Disbursement
EVENT FOOD/BEVERAGE

001

Candidate Name

Category/
Type

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	5		1	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

16.58

Transaction ID : BC4696E2860994B74AE3

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

380.08

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CRYSTAL IMAGERY

Mailing Address 680 S RIDGE RD

City
YORK SPRINGSState
PAZip Code
17372-8728Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

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	5		2	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1745.00

Transaction ID : B142C1776189D40228C3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EXXONMOBIL

Mailing Address 22777 SPRINGWOODS VILLAGE PKWY

City
SPRINGState
TXZip Code
77389-1425Purpose of Disbursement
TRAVEL

002

Candidate Name

Category/
Type

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	6		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

60.34

Transaction ID : B32D56AAE35784C29A31

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FAYETTE COUNTY REPUBLICAN PARTY OF INDIANA

Mailing Address 604 N CENTRAL AVE

City
CONNERSVILLEState
INZip Code
47331-2047Purpose of Disbursement
EVENT SPONSORSHIP

001

Candidate Name

FAYETTE COUNTY REPUBLICAN PARTY OF INDIANA

Category/
Type

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	5		2	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

220.00

Transaction ID : BA3AA489F265948819EF

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

2025.34

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FIGMA INCMailing Address 760 MARKET ST
FL 10City
SAN FRANCISCOState
CAZip Code
94102-2300Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

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	4		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B244AACD0F6324DC1927

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIGMA INCMailing Address 760 MARKET ST
FL 10City
SAN FRANCISCOState
CAZip Code
94102-2300Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

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	6		0	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B5337D8A74CFA4ECCB50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIGMA INCMailing Address 760 MARKET ST
FL 10City
SAN FRANCISCOState
CAZip Code
94102-2300Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

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	6		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B9621DB4386E64684B01

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

60.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FULLY PROMOTED

Mailing Address 432 S EMERSON AVE

City
GREENWOODState
INZip Code
46143-1948Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

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	6		0	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3167.11

Transaction ID : B0F3E4F410B0F40289A3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 2155 E GODADDY WAY

City
TEMPEState
AZZip Code
85284-3409Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

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	4		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

14.99

Transaction ID : B7F4DEF3A400C41A0959

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GODADDY.COM

Mailing Address 2155 E GODADDY WAY

City
TEMPEState
AZZip Code
85284-3409Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

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	5		1	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

14.99

Transaction ID : B20F58ECE6D6346688EA

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

3197.09

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GODADDY.COM

Mailing Address 2155 E GODADDY WAY

City
TEMPEState
AZZip Code
85284-3409Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

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	6		1	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

14.99

Transaction ID : BE91FB85787614366A56

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEWState
CAZip Code
94043-1351Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

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	5		0	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

24.32

Transaction ID : B3B7A89E5CEE74A63AF6

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City
MOUNTAIN VIEWState
CAZip Code
94043-1351Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

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	6		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

24.23

Transaction ID : BDB440F11E23B4FA7885

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

63.54

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GRIESER, RYAN, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
FIELD CONSULTING SERVICES

001

Candidate Name

Category/
Type

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	4		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BD74788A44D4F49DA9D5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GRIESER, RYAN, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
FIELD CONSULTING SERVICES

001

Candidate Name

Category/
Type

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	5		2	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B3E43D62EE29D4720979

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GRIESER, RYAN, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
FIELD CONSULTING SERVICES

001

Candidate Name

Category/
Type

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	6		2	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BF99868DF40394D27B1E

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

3000.00

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:
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HENRY COUNTY GOP

Mailing Address PO BOX 668

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2026

City
NEW CASTLEState
INZip Code
47362-0668

FEC Identification Number

C

Purpose of Disbursement
EVENT SPONSORSHIP

001

Amount of Each Disbursement this Period

1210.00

Transaction ID : B2501E7418DA04BCA95A

☐ Memo ItemCandidate Name
HENRY COUNTY GOPCategory/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. HOUSE GIFT SHOP

Mailing Address 15 INDEPENDENCE AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2026

City
WASHINGTONState
DCZip Code
20515-6001

FEC Identification Number

C

Purpose of Disbursement
OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

10.75

Transaction ID : B9D6FB94DB358429AB99

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. HOUSE GIFT SHOP

Mailing Address 15 INDEPENDENCE AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2026

City
WASHINGTONState
DCZip Code
20515-6001

FEC Identification Number

C

Purpose of Disbursement
OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

68.00

Transaction ID : B77A807D222EF4C3EB85

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1288.75

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HOUSE GIFT SHOP

Mailing Address 15 INDEPENDENCE AVE SE

City
WASHINGTONState
DCZip Code
20515-6001Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Category/
Type

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	6		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

13.20

Transaction ID : B7CA1807E88024FE3A68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. I360Mailing Address 300 CLAREDON BLVD
STE 800City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

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	4		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

170.00

Transaction ID : B433DBF18096E42039C2

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. I360Mailing Address 300 CLAREDON BLVD
STE 800City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

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	5		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

170.00

Transaction ID : B0AC8252BD8BD433CA26

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

353.20

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. I360Mailing Address 300 CLAREDON BLVD
STE 800City
ARLINGTONState
VAZip Code
22201Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

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	6		2	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

170.00

Transaction ID : B42BDFB50B7E3408E8DD

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INDIANA REPUBLICAN STATE COMMITTEEMailing Address 101 W OHIO ST
STE 2200City
INDIANAPOLISState
INZip Code
46204-4207Purpose of Disbursement
EVENT TICKETS/SPONSORSHIP

001

Candidate Name

INDIANA REPUBLICAN STATE COMMITTEE

Category/
Type

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	5		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : BC19BFFFF19D24F7E865

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INDIANA REPUBLICAN STATE COMMITTEEMailing Address 101 W OHIO ST
STE 2200City
INDIANAPOLISState
INZip Code
46204-4207Purpose of Disbursement
EVENT TICKETS/SPONSORSHIP

001

Candidate Name

INDIANA REPUBLICAN STATE COMMITTEE

Category/
Type

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	5		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : BBB7E00B406BA494788E

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

470.00

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)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INDIANA REPUBLICAN STATE COMMITTEEMailing Address 101 W OHIO ST
STE 2200City
INDIANAPOLISState
INZip Code
46204-4207Purpose of Disbursement
EVENT TICKETS/SPONSORSHIP

001

Candidate Name
INDIANA REPUBLICAN STATE COMMITTEECategory/
Type

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	6		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : BCB11944AAB4C41C68D6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTERCONTINENTAL-IHG HOTEL

Mailing Address 17 W MARKET ST

City
INDIANAPOLISState
INZip Code
46204-2905Purpose of Disbursement
TRAVEL

002

Candidate Name

Category/
Type

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	5		0	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

522.78

Transaction ID : B02B3D2CB836443C58A5

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOHNSON COUNTY GOP

Mailing Address 845 RICHART LN

City
GREENWOODState
INZip Code
46142-2067Purpose of Disbursement
EVENT SPONSORSHIP

001

Candidate Name
JOHNSON COUNTY GOPCategory/
Type

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	4		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2100.00

Transaction ID : BBAA7230334484465816

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

2772.78

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KAP PRINT

Mailing Address 220 QUINN DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2026

City
DRIPPING SPRINGSState
TXZip Code
78620-5109

FEC Identification Number

C

Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10651.27

Transaction ID : BEE6938FBEF464C4A8AD

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. KAP PRINT

Mailing Address 220 QUINN DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2026

City
DRIPPING SPRINGSState
TXZip Code
78620-5109

FEC Identification Number

C

Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

32619.62

Transaction ID : BCFBAC788EF124DB7A54

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. KAP PRINT

Mailing Address 220 QUINN DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		20		2026

City
DRIPPING SPRINGSState
TXZip Code
78620-5109

FEC Identification Number

C

Purpose of Disbursement
PRINTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

32594.70

Transaction ID : B6C4BB7824D484FED976

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

75865.59

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KB STRATEGIC GROUP

Mailing Address 3213 DUKE ST

City
ALEXANDRIAState
VAZip Code
22314-4533Purpose of Disbursement
FINANCE CONSULTING

001

Candidate Name

Category/
Type

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	5		1	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

9650.00

Transaction ID : BFA815DAD4DC443CA8B7

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LIMESTONE STRATEGIESMailing Address 5750 CASTLE CREEK PARKWAY NORTH DR
STE 367City
INDIANAPOLISState
INZip Code
46250-4336Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Category/
Type

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	4		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B07C4A870CF014789A37

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LIMESTONE STRATEGIESMailing Address 5750 CASTLE CREEK PARKWAY NORTH DR
STE 367City
INDIANAPOLISState
INZip Code
46250-4336Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

001

Candidate Name

Category/
Type

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	5		2	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B01A9411DD3E44A2C97F

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

17650.00

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	6

City
ATLANTAState
GAZip Code
30308-1884

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

135.00

Transaction ID : BDEB565BB80C84175908

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE

Date of Disbursement

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

City
ATLANTAState
GAZip Code
30308-1884

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

135.00

Transaction ID : B0E97E3904C854FF190D

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE

Date of Disbursement

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

City
ATLANTAState
GAZip Code
30308-1884

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

15.33

Transaction ID : BBD40B38B78364F8BAC8

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

285.33

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 44 OF 72

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2026

City
ATLANTAState
GAZip Code
30308-1884

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.00

Transaction ID : B10F658D2C9FE4D9E8BF

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		29		2026

City
ATLANTAState
GAZip Code
30308-1884

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

155.00

Transaction ID : B04AE2632E1934630BB4

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. NRCC

Mailing Address 320 1ST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2026

City
WASHINGTONState
DCZip Code
20003-1838

FEC Identification Number

C C00075820

Purpose of Disbursement
EVENT SPONSORSHIP

001

Candidate Name

NRCC

Category/
Type

Amount of Each Disbursement this Period

50000.00

Transaction ID : B3A81055FCF3C4436812

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

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

50180.00

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OAKEN BARREL BREWING COMPANYMailing Address 50 AIRPORT PKWY
STE LCity
GREENWOODState
INZip Code
46143-1438Purpose of Disbursement
FOOD/BEVERAGE

002

Candidate Name

Category/
Type

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	4		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

78.71

Transaction ID : B81183B31301E4586829

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OAKEN BARREL BREWING COMPANYMailing Address 50 AIRPORT PKWY
STE LCity
GREENWOODState
INZip Code
46143-1438Purpose of Disbursement
FOOD/BEVERAGE

002

Candidate Name

Category/
Type

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	5		2	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

62.65

Transaction ID : B2AB395D41C2643AFA7B

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OLD NATIONAL BANK

Mailing Address 1 MONUMENT CIR, STE 150

City
INDIANAPOLISState
INZip Code
46204-3030Purpose of Disbursement
BANK FEES

001

Candidate Name

Category/
Type

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	4		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

128.00

Transaction ID : B542BCEA1C7534FF8BE5

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

269.36

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OLD NATIONAL BANK

Mailing Address 1 MONUMENT CIR, STE 150

Date of Disbursement

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

City
INDIANAPOLISState
INZip Code
46204-3030

FEC Identification Number

C

Purpose of Disbursement
BANK FEES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

187.00

Transaction ID : B0C20EA3D85F14D2DAF6

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. OLD NATIONAL BANK

Mailing Address 1 MONUMENT CIR, STE 150

Date of Disbursement

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

City
INDIANAPOLISState
INZip Code
46204-3030

FEC Identification Number

C

Purpose of Disbursement
BANK FEES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

172.50

Transaction ID : B778E69D7435F4804BA7

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. PUBLIC OPINION STRATEGIES

Mailing Address 214 N FAYETTE ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	6

City
ALEXANDRIAState
VAZip Code
22314-2433

FEC Identification Number

C

Purpose of Disbursement
RESEARCH

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

42000.00

Transaction ID : B4558E65EAABC4B00A8E

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

42359.50

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. REPUBLICAN PARTY OF INDIANAMailing Address 101 W OHIO ST
STE 2200City
INDIANAPOLISState
INZip Code
46204-4207Purpose of Disbursement
SPONSORSHIP/EVENT TICKETS

001

Candidate Name

Category/
Type

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	5		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

276.00

Transaction ID : B1FD0CBB0C8F3417DB24

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHELBY COUNTY REPUBLICAN CENTRAL COMMITTEE

Mailing Address 144 RAMPART ST

City
SHELBYVILLEState
INZip Code
46176-9404Purpose of Disbursement
EVENT SPONSORSHIP

001

Candidate Name

SHELBY COUNTY REPUBLICAN CENTRAL COMMITTEE

Category/
Type

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	4		1	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B46BB11B96A1047E49E2

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SLACK TECHNOLOGIES, INC

Mailing Address 500 HOWARD STREET

City
SAN FRANCISCOState
CAZip Code
94105-3000Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

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	5		1	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

78.46

Transaction ID : B7F897F8C26164EA1AF1

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

1854.46

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SLACK TECHNOLOGIES, INC

Mailing Address 500 HOWARD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2026

City
SAN FRANCISCOState
CAZip Code
94105-3000

FEC Identification Number

C

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

34.43

Transaction ID : B06D0D39D6F204964A5C

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. SLACK

Mailing Address 500 HOWARD ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2026

City
SAN FRANCISCOState
CAZip Code
94105-3000

FEC Identification Number

C

Purpose of Disbursement
SOFTWARE SUBSCRIPTION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

119.39

Transaction ID : BC151E9A65DB94D23B0D

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. SQUARESPACEMailing Address 225 VARICK ST
FL 12

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2026

City
NEW YORKState
NYZip Code
10014-4383

FEC Identification Number

C

Purpose of Disbursement
WEBSITE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

201.60

Transaction ID : B6E404A1509464F63AC0

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

355.42

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)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SQUARESPACEMailing Address 225 VARICK ST
FL 12City
NEW YORKState
NYZip Code
10014-4383Purpose of Disbursement
WEBSITE

001

Candidate Name

Category/
Type

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	6		1	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

201.60

Transaction ID : B0BDC7899F1EB406B9B5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE LUGAR SERIES

Mailing Address 303 ALABAMA ST

City
INDIANAPOLISState
INZip Code
46204-2102Purpose of Disbursement
SPONSORSHIP/EVENT TICKETS

001

Candidate Name

Category/
Type

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	5		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1030.26

Transaction ID : B97F201D76AC74338BC7

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD ST

City
SAN FRANCISCOState
CAZip Code
94158-2203Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

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	4		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

18.97

Transaction ID : B37EF5E20CED54B0A8AF

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

1250.83

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2026

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

9.70

Transaction ID : B9585B678CBA3473B8BB

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2026

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

12.91

Transaction ID : B02C1EFD3BAC243B18FA

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		18		2026

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
TRAVEL TRANSPORTATION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

19.22

Transaction ID : B97126C2FF6134BF7A09

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

41.83

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:
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNBOUNCE

Mailing Address 100 GARFIELD ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		11		2026

City
DENVERState
COZip Code
80206-5597

FEC Identification Number

C

Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

99.00

Transaction ID : B2A56CB6B763A4195983

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. UNBOUNCE

Mailing Address 100 GARFIELD ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2026

City
DENVERState
COZip Code
80206-5597

FEC Identification Number

C

Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

99.00

Transaction ID : BB24D946E260E4F46B18

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UPS

Mailing Address 55 GLENLAKE PKWY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		07		2026

City
ATLANTAState
GAZip Code
30328-3474

FEC Identification Number

C

Purpose of Disbursement
SHIPPING/DELIVERY

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

45.34

Transaction ID : BD161A7592ED74B928BA

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

243.34

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WALMART

Mailing Address 702 SW 8TH ST

Date of Disbursement

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

City
BENTONVILLEState
ARZip Code
72716-6209

FEC Identification Number

C

Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

181.30

Transaction ID : B9D9D5CAD269E4697BE2

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. WAYNE COUNTY REPUBLICAN PARTY

Mailing Address PO BOX 1962

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	6

City
RICHMONDState
INZip Code
47375-1962

FEC Identification Number

C

Purpose of Disbursement
EVENT SPONSORSHIP

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1200.00

Transaction ID : B6C8B1D1506024A6A927

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	6

City
SOUTHPORTState
INZip Code
46227

FEC Identification Number

C

Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

462.70

Transaction ID : B46AE3914B9D0487DA78

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1844.00

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
FIELD CONSULTING SERVICES

001

Candidate Name

Category/
Type

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	4		2	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B793F1CC208134F358CE

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

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	5		2	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

828.39

Transaction ID : B84635B6676C348EEB95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
FIELD CONSULTING SERVICES

001

Candidate Name

Category/
Type

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	5		2	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B2F3B9A72BD1045108F0

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

2328.39

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

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	6		1	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

387.04

Transaction ID : B77243525636340299CF

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
FIELD CONSULTING SERVICES

001

Candidate Name

Category/
Type

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	6		1	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B23E729E3D989494DAB4

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WHITE, ISAAC, , ,

Mailing Address PO BOX 17182

City
SOUTHPORTState
INZip Code
46227Purpose of Disbursement
FIELD CONSULTING SERVICES

001

Candidate Name

Category/
Type

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	6		2	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B2E4827B15D104E05858

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

1887.04

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	4		2	0		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

79.61

Transaction ID : B8CADAB3A1F3B48C7AA5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	4		2	7		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

1.26

Transaction ID : BFFC1F83B458E408BAA0

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	5		0	4		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

0.25

Transaction ID : B06C07AFCD3704127BE0

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

81.12

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

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NAME OF COMMITTEE (In Full)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	5		1	1		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

0.42

Transaction ID : B7111FEE7CAB342818FB

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	5		1	8		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

1.61

Transaction ID : B8AB1C34A79624436B86

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	5		2	6		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

0.62

Transaction ID : BB1BF6A8C372045FC939

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

2.65

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	6		0	1		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

1.13

Transaction ID : BE53489AFBC4D41DFA74

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	6		0	8		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

2.57

Transaction ID : B677F2BD6C018492F93B

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	6		2	2		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

0.42

Transaction ID : BB44DCEA4C69D468EA46

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

4.12

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINREDMailing Address 1603 CAPITOL AVE
STE 413B562City
CHEYENNEState
WYZip Code
82001-4569Purpose of Disbursement
CREDIT CARD MERCHANT FEE

001

Candidate Name
WINREDCategory/
Type

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	6		2	9		2	0	2	6

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

20.24

Transaction ID : BCC0FE15212A244F8A11

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ZOOM

Mailing Address 55 S ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-1608Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name

Category/
Type

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	5		1	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

16.99

Transaction ID : BE433BCA042114E51947

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ZOOM

Mailing Address 55 S ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-1608Purpose of Disbursement
SUBSCRIPTION

001

Candidate Name

Category/
Type

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	6		1	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

16.99

Transaction ID : BE6F00D7421654421998

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

54.22

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

222890.07

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)

SHREVE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ETHAN LAWSON FOR INDIANA

Mailing Address PO BOX 145

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2026

City
GREENFIELDState
INZip Code
46140-0145

FEC Identification Number

C

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Amount of Each Disbursement this Period

1500.00

Transaction ID : B54EC325824F94DC6BEA

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1500.00

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

1500.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 60 OF 72

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C6A7F6FC589A04443B97

SHREVE FOR CONGRESS

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

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 16 / 2024

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).....▶

100000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 61 OF 72

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C6FDE22CD942F476C8F9

SHREVE FOR CONGRESS

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

Election: 2024

SHREVE, JEFFERSON, , ,

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 05 / 2024

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).....▶

50000.00

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

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

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

PAGE 62 OF 72

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

NAME OF COMMITTEE (In Full)

Transaction ID : CC99C6BF6D26247419FF

SHREVE FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

1000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 29 / 2025M 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).....▶

1000000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 63 OF 72

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CA041F3E6D2D64F809A6

SHREVE FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

1000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2024

M M / D D / Y Y Y Y

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).....▶

200000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 64 OF 72

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C90FFB25E53CC4FFE900

SHREVE FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

700000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 28 / 2024

M M / D D / Y Y Y Y

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).....▶

0.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 65 OF 72

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CBFF3D1FC2D0D46F6998

SHREVE FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

600000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

600000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 / 26 / 2024

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).....▶

600000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 66 OF 72

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C9FE6944440CD40C1A2F

SHREVE FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

300000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

300000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2024

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).....▶

300000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 67 OF 72

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C2BFDBFB36A9643EDAB8

SHREVE FOR CONGRESS

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

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 07 / 2024

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).....▶

50000.00

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

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

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

PAGE 68 OF 72

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

NAME OF COMMITTEE (In Full)

Transaction ID : C755C9D8D3C4940199B2

SHREVE FOR CONGRESS

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

Election: 2026

SHREVE, JEFFERSON, , ,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

1000000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 29 / 2025M 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).....▶

1000000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 69 OF 72

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CE130FB8252BF49B5AF8

SHREVE FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 11 / 2024

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).....▶

0.00

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

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

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

PAGE 70 OF 72

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

NAME OF COMMITTEE (In Full)

Transaction ID : C4C0B138262214F288FE

SHREVE FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 18 / 2024

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).....▶

500000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 71 OF 72

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CEA4F5FB9BCF54383A38

SHREVE FOR CONGRESS

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

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 / 24 / 2024M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONEM 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).....▶

50000.00

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

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

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

PAGE 72 OF 72

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

NAME OF COMMITTEE (In Full)

Transaction ID : C75AE888D13C34C5BBD3

SHREVE FOR CONGRESS

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

Election: 2024

☐ Primary☒ General☐ Other (specify) ▼

SHREVE, JEFFERSON, , ,

Mailing Address

PO BOX 17182

City

SOUTHPORT

State

IN

ZIP Code

46227

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 / 23 / 2024M M / D D / Y Y Y Y
/ / NONEM M / D D / Y Y Y Y
/ / NONEM 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).....▶

50000.00

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

3900000.00

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