

**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

MCDOWELL FOR CONGRESS

ADDRESS (number and street)

PO BOX 80172



Check if different than previously reported. (ACC)

RALEIGH

NC

27623-0172

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00860064

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

NC

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 / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2025

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2025

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

Type or Print Name of Treasurer FORNSHELL, GREG, , ,

Signature of Treasurer

FORNSHELL, GREG, , ,

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

08

Y Y Y Y

2025

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

MCDOWELL FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	321433.91	517444.55
(b) Total Contribution Refunds (from Line 20(d))	1248.14	11178.82
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	320185.77	506265.73
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	158604.11	300840.87
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	5165.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	158604.11	295675.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	264566.08	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

MCDOWELL FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2025

To:

M M / D D / Y Y Y Y
06 / 30 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

221064.05

326827.72

(ii) Unitemized

1869.86

2116.83

(iii) TOTAL of contributions
from individuals ▶

222933.91

328944.55

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

98500.00

188500.00

(d) The Candidate

0.00

0.00

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

321433.91

517444.55

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

5165.28

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

0.00

20000.00

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

321433.91

542609.83

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.....	158604.11	300840.87
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	1248.14	7678.82
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1248.14	11178.82
21. OTHER DISBURSEMENTS	0.00	70000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	159852.25	382019.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	102984.42
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	321433.91
25. SUBTOTAL (add Line 23 and Line 24).....	424418.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	159852.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	264566.08

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: F3N
Transaction ID :

SCHEDULE B INCLUDES ALL REQUIRED MEMO ENTRIES FOR REIMBURSEMENTS. ALL
ADDITIONALREIMBURSEMENTS DO NOT MEET THE \$200.00 PER VENDOR AGGREGATE THRESHOLD.

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: PAGE 6 OF 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

ABSHER, ALTON, , ,

A.

Mailing Address 3974 HUDDINGTON CT

City

WINSTON SALEM

State

NC

Zip Code

27106-6362

FEC ID number of contributing
federal political committee.

C

Name of Employer

KILPATRICK TOWNSEND STOCKTON LLP

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3082.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : ABA6EDAC1D5C74BC4BC9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A815AC49E0253404D8BC

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)

ALBERTSON, JOHNN, , ,

C.

Mailing Address 5312 DORCHESTER RD

City

GREENSBORO

State

NC

Zip Code

27407

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

CONTRACTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : ACF76A2A513D5450298E

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

4500.00

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

PAGE 7 OF 205

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

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

NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED**A.** Mailing Address PO BOX 9891City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A895E9C0BDA7F4F20B55

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)
ALETY, SAAT, , ,Mailing Address 900 11TH ST SE
UNIT 207City
WASHINGTONState
DCZip Code
20003-2546FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

FEDERAL HALL POLICY ADVISORS

PARTNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AF588E10DAF6A4826B16

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AAF66DC4D0B2649BE8B9

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 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)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

BAIRD, FREDERICK, , ,

A.

Mailing Address 637 SOUTH 25TH

City

ARLINGTON

State

VA

Zip Code

22202

FEC ID number of contributing
federal political committee.

C

Name of Employer

OFF HILL STRATEGIES

Occupation

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 16 2025

Transaction ID : A2C52B7E8444248FD834

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 16 2025

Transaction ID : A582FD3A4E4214152A8F

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BAIRD, JENNIFER, , ,

C.

Mailing Address 637 25TH ST S

City

ARLINGTON

State

VA

Zip Code

22202

FEC ID number of contributing
federal political committee.

C

Name of Employer

OFF HILL STRATEGIES

Occupation

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 16 2025

Transaction ID : AB5EFE4F2B36C4996B12

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 16 2025

Transaction ID : A118AD9A944A64E76A04

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

BARBOUR, IV, DEVAN, , ,

Mailing Address 2383 FEDERAL ROAD

City

BENSON

State

NC

Zip Code

27504

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE EMPLOYEE BENEFITS

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A63AA1C42D94B414D902

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : AAF480D5B21B54286A9B

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

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

1000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

BAREFOOT, ZEKE, , ,

A.

Mailing Address 1038 ILEAGNES ROAD

City
RALEIGH

State
NC

Zip Code
27603

FEC ID number of contributing
federal political committee.

C

Name of Employer
FERGUSON

Occupation
OUTSIDE SALES

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A72E31BF96C924E3A8A1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A3DD4F3D6B511451ABBF

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)

BIRK, JOHN, , ,

C.

Mailing Address 476 44TH AVE DR NE

City
HICKORY

State
NC

Zip Code
28601

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : A15D9F1BED71940F28AF

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

2041.02

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

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)

PAGE 11 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AA3B886F00ABB432B9D8

Amount of Each Receipt this Period

1041.02

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

BLAINE, JAMES, , ,

Mailing Address 4613 STORMY GALE RD

City

RALEIGH

State

NC

Zip Code

27614

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

Name of Employer

Occupation

SELF

CONSULTING

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A5DA58A04D22E4BED9C6

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AA94DC7501AE740E5AB0

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

500.00

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

PAGE 12 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

BREMNER, ERIC, , ,**A.**

Mailing Address 18833 RIVER FALLS DRIVE

City

DAVIDSON

State

NC

Zip Code

28036-8856

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : A996AD9F782804B35A83

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRITT, DANNY, , ,**B.**

Mailing Address 1101 NORTH WALNUT STREET

City

LUMBERTON

State

NC

Zip Code

28358

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE BRITT LAW FIRMOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	2	5

Transaction ID : A145F9245C64C4194BAC

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	2	5

Transaction ID : A2BFD8D4F94F8475CB16

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

4000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

BROUGHTON, JAMES, W.C., ,

A.

Mailing Address 3735 SAPONA TRL

City

PFAFFTOWN

State

NC

Zip Code

27040-9427

FEC ID number of contributing
federal political committee.

C

Name of Employer

ATRIUM HEALTH

Occupation

GOVERNMENT RELATIONS

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
04 / 14 / 2025

Transaction ID : AAA3EB52EB0C949869A8

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BROWN, HOPE, , ,

B.

Mailing Address PO BOX 751

City

LEWISVILLE

State

NC

Zip Code

27023

FEC ID number of contributing
federal political committee.

C

Name of Employer

NORTH STATE SECURITY GROUP

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2025

Transaction ID : A5F2F714014994C4FAD2

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

C.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2025

Transaction ID : AE98D12327FDB497D955

Amount of Each Receipt this Period

1041.02

☒ Memo Item

INTERMEDIARY

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

1541.02

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

BROWN, LEIGH, , ,**A.**

Mailing Address 9808 CHESTNUT HILLS RD

City

HARRISBURG

State

NC

Zip Code

28075

FEC ID number of contributing
federal political committee.**C**Name of Employer
ONE COMMUNITY REAL ESTATEOccupation
REALTOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A870D94949ABB42A2856

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A1E11CCF4E1804EE5985

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BRYAN, ROB, , ,**C.**

Mailing Address 3517 BROADFIELD RD

City

CHARLOTTE

State

NC

Zip Code

28226

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

Name of Employer

SLIM CHICKEN

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A31A8EB553CA64DC5ACC

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

500.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED**A.** Mailing Address PO BOX 9891City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A4A80B739CEB84784954

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)
BRYANT, GREGORY, , ,**B.** Mailing Address PO BOX 993City
PEMBROKEState
NCZip Code
28372-0993FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

SELF-EMPLOYED

HEALTHCARE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A99A4790BCA4A4B0E8EF

Amount of Each Receipt this Period

3500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
BUCHANAN, DEE, , ,**C.** Mailing Address 1801 K STREET, NWCity
WASHINGTONState
DCZip Code
20036FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

OGR

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
0	6		3	0		2	0	2	5

Transaction ID : ABBCC7F81859C4A708B4

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AC81A4E04BE894EA4BFA

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

BUCKALEW, ADAM, , ,

Mailing Address 227 12TH ST NE

City

WASHINGTON

State

DC

Zip Code

20002-6315

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

Name of Employer

SALT POINT STRATEGIES

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ACDA396AB6AEC45E8B7B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A9D1250BE28D24932A4C

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

BURLESON, JOE, , ,

A.

Mailing Address 248 MARKET STREET

City
LOCUST

State
NC

Zip Code
28097-9437

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
REAL ESTATE DEVELOPER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3643.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2025

Transaction ID : A3E703F287A3844FD85B

Amount of Each Receipt this Period

3643.56

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2025

Transaction ID : A8F523F3D7C19466D996

Amount of Each Receipt this Period

3643.56

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BURR, JARRET, , ,

C.

Mailing Address 309 W PARK DR

City
RALEIGH

State
NC

Zip Code
27605-1741

FEC ID number of contributing
federal political committee.

C

Name of Employer
BURR CAPITOL CONSULTING

Occupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 14 2025

Transaction ID : A2EA17C68F95F4706974

Amount of Each Receipt this Period

500.00

☐ Memo Item

4143.56

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

CAIN, JAMES, PALMER, ,

A.

Mailing Address 3014 FAIRVIEW RD

City
RALEIGHState
NCZip Code
27608-1132FEC ID number of contributing
federal political committee.

C

Name of Employer
KILPATRICK TOWNSEND LLCOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 14 2025

Transaction ID : A6E896509343C44A7BAA

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CARROLL, ROY, E, , II

B.

Mailing Address PO BOX 9846

City
GREENSBOROState
NCZip Code
27429-0846FEC ID number of contributing
federal political committee.

C

Name of Employer
THE CARROLL COMPANIESOccupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 06 2025

Transaction ID : A32EA22F2B64046F3814

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CLARK, DALTON, , ,

C.

Mailing Address 323 WINDGATE DRIVE

City
CLAYTONState
NCZip Code
27527-3319FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICANS FOR PROSPERITYOccupation
SENIOR STATE GOVERNMENT AFFAIRS LIA

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

676.66

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : A99E8C7D599EB4D11A23

Amount of Each Receipt this Period

416.41

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4216.41

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A2A7389DC54BC4B7C989

Amount of Each Receipt this Period

416.41

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

CLEMENT, PENUEL RAJ, , ,

Mailing Address 11387 MOSLEY FOREST DR

City

SAINT LOUIS

State

MO

Zip Code

63141

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

Name of Employer

CLEMENT HOLDINGS

Occupation

CEO CHAIRMAN

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	5

Transaction ID : A3A43679FE77641F0B01

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AF6FCD798349344F8AF3

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

1000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

CLINE, BRENDA, K, ,

A. Mailing Address 870 18TH AVE CT NWCity
HICKORYState
NCZip Code
28601-1271FEC ID number of contributing
federal political committee.

C

Name of Employer
DALE K CLINEOccupation
CPA

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 13 2025

Transaction ID : AC110CFDF97914D02942

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CLINE, BRENDA, K, ,

B. Mailing Address 870 18TH AVE CT NWCity
HICKORYState
NCZip Code
28601-1271FEC ID number of contributing
federal political committee.

C

Name of Employer
DALE K CLINEOccupation
CPA

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 13 2025

Transaction ID : A3163016B27234B1CAB4

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CLINE, DALE, K, ,

C. Mailing Address 870 18TH AVE CT NWCity
HICKORYState
NCZip Code
28601-1271FEC ID number of contributing
federal political committee.

C

Name of Employer
DALE K CLINE CPA LLCOccupation
CPA

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 13 2025

Transaction ID : A47B1EE93304E46BE9CA

Amount of Each Receipt this Period

3500.00

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

10500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

CLINE, DALE, K, ,

A.

Mailing Address 870 18TH AVE CT NW

City
HICKORY

State
NC

Zip Code
28601-1271

FEC ID number of contributing
federal political committee.

C

Name of Employer
DALE K CLINE CPA LLC

Occupation
CPA

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 13 2025

Transaction ID : A3011F3F66093400FADC

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CONGDON, DAVID, S, ,

B.

Mailing Address 1030 ROCKFORD RD

City
HIGH POINT

State
NC

Zip Code
27262

FEC ID number of contributing
federal political committee.

C

Name of Employer
OLD DOMINION FREIGHT

Occupation
EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A7A9CAA1137D5453DBE6

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

C.

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A1AB7FD6FD9214A20BB0

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

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

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

7000.00

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

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

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

CONGDON, DAVID, S, ,

A.

Mailing Address 1030 ROCKFORD RD

City

HIGH POINT

State

NC

Zip Code

27262

FEC ID number of contributing
federal political committee.

C

Name of Employer

OLD DOMINION FREIGHT

Occupation

EXECUTIVE

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : AA06211129AA144F5BF9

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : AF978CEBA199D403D8B3

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

CONGER, LAWRENCE, , ,

C.

Mailing Address 422 MARLOWE RD

City

RALEIGH

State

NC

Zip Code

27609-7018

FEC ID number of contributing
federal political committee.

C

Name of Employer

CONSILIUM

Occupation

MD

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 09 2025

Transaction ID : A359032734FE545FE92C

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

3750.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED**A.** Mailing Address PO BOX 9891City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		09		2025

Transaction ID : A084E391DAEA84D6EADF

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)
CONGER, SUZY, , ,**B.** Mailing Address 422 MARLOWE RDCity
RALEIGHState
NCZip Code
27609-7018FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

SELF

JEWELER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		09		2025

Transaction ID : ADBE2536801004E1C860

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)
WINRED**C.** Mailing Address PO BOX 9891City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		09		2025

Transaction ID : A2321761224E14716AA0

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

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

250.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

CONRAD, MARSHALL, , ,

A.

Mailing Address 108 KODI COURT

City
GARNER

State
NC

Zip Code
27529-7654

FEC ID number of contributing
federal political committee.

C

Name of Employer
STRATA CLEAN ENERGY

Occupation
LAWYER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

353.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A0FAFA08996C74009AAE

Amount of Each Receipt this Period

353.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A92500909A00D43BD887

Amount of Each Receipt this Period

353.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

COOKE, MICHAEL, , ,

C.

Mailing Address 3507 GASTON RD

City
GREENSBORO

State
NC

Zip Code
27407

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : A2EB6C0CA83C344E7A7A

Amount of Each Receipt this Period

3500.00

☐ Memo Item

3853.00

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

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)

PAGE 25 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

COOKE, MICHAEL, , ,

A.

Mailing Address 3507 GASTON RD

City

GREENSBORO

State

NC

Zip Code

27407

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : AE5934F9D73F04E61B14

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

COOKE, TRACY, , ,

Mailing Address 3507 GASTON ROAD

City

GREENSBORO

State

NC

Zip Code

27407-7266

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

Transaction ID : A1DFD6F7D7DD74B7E9AB

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

Transaction ID : A21387069868E43E7825

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

COOKE, TRACY, , ,

A.

Mailing Address 3507 GASTON ROAD

City

GREENSBORO

State

NC

Zip Code

27407-7266

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 17 2025

Transaction ID : A61DA1D1C6996481F984

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 17 2025

Transaction ID : A593162DC7BCF4117BD5

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

CRUTCHFIELD, KEVIN, R, ,

C.

Mailing Address 9817 MOUNT PLEASANT RD S

City

MIDLAND

State

NC

Zip Code

28107-7766

FEC ID number of contributing
federal political committee.

C

Name of Employer

CASCO SIGNS INC.

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 28 2025

Transaction ID : A70F95A9B44EC42F28D4

Amount of Each Receipt this Period

250.00

☐ Memo Item

3750.00

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

D/B/A RS, LLC, OTOE MISSOURIA TRIBE, , ,

A. Mailing Address 6151 HIGHWAY 177City
RED ROCKState
OKZip Code
74651FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
N/A

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 18 2025

Transaction ID : A66E007ED694F44C48B2

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAVIS, SMITH, W, ,

B. Mailing Address 4208 KIMBRELEE CTCity
ALEXANDRIAState
VAZip Code
22309-3000FEC ID number of contributing
federal political committee.

C

Name of Employer
SMITH DAVIS ADVISORY & RESEARCH LLCOccupation
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 Y Y
06 20 2025

Transaction ID : AA3FE60078E64410096A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DENNIS, GARY, , ,

C. Mailing Address 9110 FOUR MILE CREEK RDCity
GAINESVILLEState
GAZip Code
30506FEC ID number of contributing
federal political committee.

C

Name of Employer
NXUMOccupation
FINANCE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 17 2025

Transaction ID : AD562E235E7B540CF9FD

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

7500.00

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

PAGE 28 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

Transaction ID : AEEEA836BA3FF4AE4B77

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

DENNIS, GARY, , ,

Mailing Address 9110 FOUR MILE CREEK RD

City

GAINESVILLE

State

GA

Zip Code

30506

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

Name of Employer

Occupation

NXUM

FINANCE

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

Transaction ID : A4783AC5C9C4142DDB54

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

Transaction ID : A639BC19619114637A4B

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

DINWIDDIE, TRAFTON, , ,

A.

Mailing Address 4508 STILL PINES DR

City

RALEIGH

State

NC

Zip Code

27613-3331

FEC ID number of contributing
federal political committee.

C

Name of Employer

KILPATRICK TOWNSEND STOCKTON

Occupation

GOVERNMENT RELATIONS

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2025

09

2025

Transaction ID : A6B2025C506864BDAB40

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2025

09

2025

Transaction ID : AF009CDEF67B44FE1888

Amount of Each Receipt this Period

260.25

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

DUNAWAY, ROBERT, , ,

C.

Mailing Address 905 HEMINGNWAY DR.

City

RALEIGH

State

NC

Zip Code

27609

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREEN HARBOR CAPITAL

Occupation

OWNER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2025

12

2025

Transaction ID : A21C57BC530104550ABC

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

510.25

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 Page

FOR LINE NUMBER: PAGE 30 OF 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A74FA4A2B1EA44F27B88

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

DUNAWAY, ROBERT, , ,

Mailing Address 905 HEMINGWAY DR.

City

RALEIGH

State

NC

Zip Code

27609

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

Name of Employer

GREEN HARBOR CAPITAL

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AE557DC1A3F9340FFA6B

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A048A9533D7714ADF975

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

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

250.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

EDWARDS, HOLLY, , ,

A.

Mailing Address 5500 RANDOLPH RD

City

KANNAPOLIS

State

NC

Zip Code

28081

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOLTON CONSTRUCTION CONCEPTS

Occupation

GENERAL CONTRACTOR

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 28 2025

Transaction ID : A9324B574888043BF9E4

Amount of Each Receipt this Period

260.25



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 28 2025

Transaction ID : A8860B08046244914AEC

Amount of Each Receipt this Period

260.25



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

EDWARDS, J, BRAD, ,

C.

Mailing Address 403 LLOYDS LANE

City

ALEXANDRIA

State

VA

Zip Code

22302-3712

FEC ID number of contributing
federal political committee.

C

Name of Employer

JHC

Occupation

CONSULTANT

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 29 2025

Transaction ID : AA0CA99515C25450E9E3

Amount of Each Receipt this Period

500.00



Memo Item

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

760.25

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

ESTRAMONTE, MICHAEL, , ,

A. Mailing Address 2321 MECKLENBURG AVENUECity
CHARLOTTEState
NCZip Code
28205-3101FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
HEALTHCARE

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
05 19 2025

Transaction ID : A3D9ABF84A97245F0A6E

Amount of Each Receipt this Period

1500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
05 19 2025

Transaction ID : AC503DDA9BA8C422EB8E

Amount of Each Receipt this Period

1500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

FERRIS, ROBBIE, , ,

C. Mailing Address 11312 OLD CREEDMOOR ROADCity
RALEIGHState
NCZip Code
27613-6906FEC ID number of contributing
federal political committee.

C

Name of Employer
SFLA ARCHITECTSOccupation
ARCHITECT

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
04 11 2025

Transaction ID : ACF8FF1159A8B47438C3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4000.00

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)

PAGE 33 OF 205

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

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

NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A1724E81064EB4DA4AB4

Amount of Each Receipt this Period

2500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

FLOW, ERIC, , ,

Mailing Address 8570 BROOK MEADOW COURT

City

LEWISVILLE

State

NC

Zip Code

27023-9434

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

Name of Employer

Occupation

FLOW AUTOMOTIVE

COO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	2	5

Transaction ID : AF8E26873800F41BD930

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	2	5

Transaction ID : A0B58339ACF0F4CDEB98

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

FLOW, ERIC, , ,

A.

Mailing Address 8570 BROOK MEADOW COURT

City

LEWISVILLE

State

NC

Zip Code

27023-9434

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLOW AUTOMOTIVE

Occupation
COO

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 29 2025

Transaction ID : A806E555BBBB049AD95D

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 29 2025

Transaction ID : A0157697260234968ACD

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

FOREST, DAN, , ,

C.

Mailing Address 1765 IRON MILL DR

City

WENDELL

State

NC

Zip Code

27591-9815

FEC ID number of contributing
federal political committee.

C

Name of Employer
NC CAPSTRAT

Occupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 08 2025

Transaction ID : A1153BA481370413883C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

4500.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	5

Transaction ID : AE0E9EC81E3A04A52905

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)

FREEMAN, NELSON, , ,

Mailing Address 1337 BROOKS AVE

City

RALEIGH

State

NC

Zip Code

27607-3703

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

Name of Employer

CHECKMATE GOVERNMENT RELATIONS

Occupation

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AB30C888A7A1F4FFB9D0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A9E355EA7116E45D09D8

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

1000.00

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

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

PAGE 36 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

GLEASON, STEFAN, , ,

A.

Mailing Address PO BOX 49246

City

CHARLOTTE

State

NC

Zip Code

28277-0076

FEC ID number of contributing
federal political committee.

C

Name of Employer

ASCENSION MARKETING GROUP

Occupation

MARKETING

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : ACC32F9BA41564D01BE6

Amount of Each Receipt this Period

500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A58FBA4F3B9324484A78

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

GROSS, MARK, , ,

C.

Mailing Address 4131 PARKLAKE AVENUE

City

RALEIGH

State

NC

Zip Code

27612

FEC ID number of contributing
federal political committee.

C

Name of Employer

OGT

Occupation

CHAIRMAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A88195E30734C40DA8C2

Amount of Each Receipt this Period

3500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A6374CF065889497FBF5

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

GROSS, MARK, , ,

Mailing Address 4131 PARKLAKE AVENUE

City

RALEIGH

State

NC

Zip Code

27612

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

Name of Employer

Occupation

OGT

CHAIRMAN

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A3883CCE90B59420F987

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AAD5DC2817F884753B21

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

3500.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

HARDIN, JOHN, , ,

A.

Mailing Address 2415 ANDERSON DRIVE

City

RALEIGH

State

NC

Zip Code

27608

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE RALEIGH GROUP

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

Transaction ID : A97EBD2C777FE4EDDBCBC

Amount of Each Receipt this Period

2000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

Transaction ID : A5B489F37E4794E0EB02

Amount of Each Receipt this Period

2000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

HENNESSY, JAMES, , ,

C.

Mailing Address P O BOX 2372

City

KITTY HAWK

State

NC

Zip Code

27949-2372

FEC ID number of contributing
federal political committee.

C

Name of Employer

PAMLICO MANAGEMENT GROUP

Occupation

PROPRIETOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3123.05

Date of Receipt

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

Transaction ID : A331244E526D94392AB7

Amount of Each Receipt this Period

3123.05

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

5123.05

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A364A57C86BFA4372A2B

Amount of Each Receipt this Period

3123.05

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

HINES, ROBERT, TODD, ,

Mailing Address 8716 LONGVIEW CLUB DR

City

WAXHAW

State

NC

Zip Code

28173-6696

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

Name of Employer

Occupation

WILD SPORTS

EXECUTIVE

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A66B09755051D41619D8

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

HINES, ROBERT, TODD, ,

Mailing Address 8716 LONGVIEW CLUB DR

City

WAXHAW

State

NC

Zip Code

28173-6696

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

Name of Employer

Occupation

WILD SPORTS

EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A7D08F4D245614CDC8A0

Amount of Each Receipt this Period

3500.00

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

7000.00

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

ISLEY, PHILIP, , ,

A.

Mailing Address 3400 COLERIDGE DRIVE

City
RALEIGHState
NCZip Code
27609-7114FEC ID number of contributing
federal political committee.

C

Name of Employer
BLANCHARD MILLER LEWIS ISLEY PAOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1561.52

Date of Receipt

M M / D D / Y Y Y Y Y
04 11 2025

Transaction ID : A3F7DD78A3857426B8E1

Amount of Each Receipt this Period

1561.52

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 11 2025

Transaction ID : AECE01396936B40ADA0B

Amount of Each Receipt this Period

1561.52

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

JOHNSON, BRIAN, , ,

C.

Mailing Address 528 N COLUMBUS STREET

City
ALEXANDRIAState
VAZip Code
22314-2216FEC ID number of contributing
federal political committee.

C

Name of Employer
VETERANS GUARDIANOccupation
VICE PRESIDENT

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A01F5E9FCE7844E17978

Amount of Each Receipt this Period

800.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

2361.52

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A8C15F0FB27244F169EC

Amount of Each Receipt this Period

800.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

JOHNSON, BRIAN, , ,

Mailing Address 528 N COLUMBUS STREET

City

ALEXANDRIA

State

VA

Zip Code

22314-2216

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

Name of Employer

VETERANS GUARDIAN

Occupation

VICE PRESIDENT

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

4300.00

Date of Receipt

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

Transaction ID : A2E9F483BEAC94C0DB0E

Amount of Each Receipt this Period

200.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A4C6D58B536C147A09AF

Amount of Each Receipt this Period

200.00

☒ Memo Item

INTERMEDIARY

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

200.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 42 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

JONES, DANA, , ,

A.

Mailing Address 600 SUSANNA COURT

City

KERNERSVILLE

State

NC

Zip Code

27284-2199

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAUDILL'S

Occupation

OWNER

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1561.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 03 2025

Transaction ID : ABF30B2E008FE4084B2E

Amount of Each Receipt this Period

1561.52

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 03 2025

Transaction ID : ABAB28AEF81084B65AFA

Amount of Each Receipt this Period

1561.52

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

JONES, EMILY, L, ,

C.

Mailing Address PO BOX 543

City

PEMBROKE

State

NC

Zip Code

28372-0543

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNC PEMBROKE

Occupation

MEDIA & COMMUNICATIONS MANAGER

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 14 2025

Transaction ID : A488E6C35D69A4E81A92

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

2061.52

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 43 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOYNER, JASON, , ,

A.

Mailing Address 505 COMMANDER DR

City

WENDELL

State

NC

Zip Code

27591-8834

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOYNER GOVERNMENT AFFAIRS

Occupation

GOVERNMENT AFFAIRS

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 29 2025

Transaction ID : A41F289E51D434C589D5

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 29 2025

Transaction ID : A5AEA001926EC40B3AB7

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

KAPLAN, HARRISON, , ,

C.

Mailing Address 2304 SWEET BIRCH CT

City

RALEIGH

State

NC

Zip Code

27613-8533

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCGUIREWOODS CONSULTING

Occupation

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : A8D3F3CED071D4CC193F

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

1000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A563B6725A8204D90BB3

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

KELLMAN, OLIVER, , ,

Mailing Address 1717 PENNSYLVANIA AVE. NW #1025

City

WASHINGTON

State

DC

Zip Code

20006

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

Name of Employer

DLG PARTNERS

Occupation

MANAGING PARTNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AF6E1595ADA1442D8822

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AF1AD98B6CBAF4AA98E6

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

KENNEY, STEPHEN, A, ,

A. Mailing Address PO BOX 99568City
RALEIGHState
NCZip Code
27624-9568FEC ID number of contributing
federal political committee.

C

Name of Employer
KENNEY PROPERTIESOccupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A4FA8D558F41947F39F6

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KERR, JAMES, , ,

B. Mailing Address 318 N. HAYNE STCity
MONROEState
NCZip Code
28112FEC ID number of contributing
federal political committee.

C

Name of Employer
JKERR COMPANIESOccupation
REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

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

Transaction ID : A242D35DF91624D38AAE

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A8A9E16E2E7F2489AA9D

Amount of Each Receipt this Period

260.25

☒ Memo Item

INTERMEDIARY

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

3760.25

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

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

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

FOR LINE NUMBER: PAGE 46 OF 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

KOURY, CAITLIN, , ,

A.

Mailing Address 23 6TH ST NE

City

WASHINGTON D.C.

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHECKMATE

Occupation
GOVERNMENT RELATIONS

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 2025

Transaction ID : AD668FC526709466097A

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A5A69208C0B494E48A2F

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

LACIVITA JR, CHRISTOPHER, , ,

C.

Mailing Address 3075 FRENCH HILL DRIVE

City

POWHATAN

State

VA

Zip Code

23139

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHECKMATE GOVERNMENT RELATIONS

Occupation
PUBLIC AFFAIRS DIRECTOR

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 2025

Transaction ID : AC07D89FBE2894F5BB90

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A84E43490B2564C6DB28

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

LINDSEY, RYAN, , ,

Mailing Address 5008 LOCKWOOD DR

City

WACO

State

TX

Zip Code

76710

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

Name of Employer

Occupation

CRH AMERICAS

GOVERNMENT RELATIONS

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A9669368D8A1A470A99E

Amount of Each Receipt this Period

1000.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A9C79D320D5174BA9A92

Amount of Each Receipt this Period

1000.00



Memo Item

INTERMEDIARY

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

1000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARTIN, CHARLES, RAY, ,

A. Mailing Address 4607 STORMY GALE RDCity
RALEIGHState
NCZip Code
27614-8356FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
CONSULTANT

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
06 30 2025

Transaction ID : AFEF57CB2688D4360AA6

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCCARTHY, MARTIN, F, ,

B. Mailing Address 4205 QUAIL HUNT LNCity
CHARLOTTEState
NCZip Code
28226-7941FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
EDUCATIONAL REFORM

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 28 2025

Transaction ID : AD6EAD6ADE47342E891F

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCDOWELL, CHES, , ,

C. Mailing Address 2088 BETHESDA RDCity
LEXINGTONState
NCZip Code
27295FEC ID number of contributing
federal political committee.

C

Name of Employer
CHECKMATE GROccupation
MANAGING PARTNER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : AB5953B39294B4A3BBFA

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

6250.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AC070E667940F431DA99

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

Mailing Address 2088 BETHESDA RD

City
LEXINGTONState
NCZip Code
27295FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

CHECKMATE GR

MANAGING PARTNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : AED8C988944CB478381D

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : ACAF4D3712BBE4F3C998

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

3500.00

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

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

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

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

MCGREGOR, RYAN, , ,

A.

Mailing Address 701 BRICKELL KEY BLVD

City
MIAMI

State
FL

Zip Code
33131

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARCHITECT

Occupation
FINANCE

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 26 2025

Transaction ID : AD8A8086721EB4A56820

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : A2CD19B0C0B54480EA44

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MCNEELY, JEFFREY, C, ,

C.

Mailing Address 191 NEW STERLING RD

City
STONY POINT

State
NC

Zip Code
28678-8704

FEC ID number of contributing
federal political committee.

C

Name of Employer
G M MILLING CO

Occupation
OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1561.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 28 2025

Transaction ID : A471E8F24412E41D8874

Amount of Each Receipt this Period

1561.52

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

2061.52

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AAEE86B059CEA4DACB3E

Amount of Each Receipt this Period

1561.52



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

MILLER, JEFFREY, , ,

Mailing Address 1000 S POINTE DR #2803

City

MIAMI BEACH

State

FL

Zip Code

33139

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

MILLER STRATEGIES, LLC

CEO

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A17CCCF6F57E04382BE4

Amount of Each Receipt this Period

2500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AA44CDA0037E54C80A43

Amount of Each Receipt this Period

2500.00



Memo Item

INTERMEDIARY

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

2500.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

MISKEW, DOUGLAS, , ,

A.

Mailing Address 105CRYSTLEWOOD COURT

City

MORRISVILLE

State

NC

Zip Code

27560

FEC ID number of contributing
federal political committee.

C

Name of Employer

PUBLIC SECTOR GROUP

Occupation

MARKETING

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2025D D / Y Y Y Y Y
20 / 2025Y Y Y Y Y
2025

Transaction ID : ABA8D192C5ACC4EABA94

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2025D D / Y Y Y Y Y
20 / 2025Y Y Y Y Y
2025

Transaction ID : ADB11E290E1454075870

Amount of Each Receipt this Period

1041.02

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MITCHELL, DOUGLAS, , ,

C.

Mailing Address 1204 WOODGROVE PARK DR

City

O FALLON

State

MO

Zip Code

63366-1584

FEC ID number of contributing
federal political committee.

C

Name of Employer

GATEWAY CITY CONSULTING

Occupation

CONSULTANT

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2025D D / Y Y Y Y Y
14 / 2025Y Y Y Y Y
2025

Transaction ID : A9EB343E1A1974126A4C

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1561.53

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)

PAGE 53 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A13AAC759F9F14C8C819

Amount of Each Receipt this Period

520.51

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

MOORE, WILLIAM, NEIL, ,

Mailing Address 1505 SOUTHPOINT ROAD

City

BELMONT

State

NC

Zip Code

28012-7503

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRONTIER POLITICAL GROUP

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A9675A3E95134411CA34

Amount of Each Receipt this Period

500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

MULL, HARRISON, , ,

Mailing Address 348 NICKLEBY WY

City

WENDELL

State

NC

Zip Code

27591-4503

FEC ID number of contributing
federal political committee.

C

Name of Employer

VIR BIOTECHNOLOGY

Occupation

VENDOR DEVEL. OUTSOURCING CONTRAC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A74C3438882D44FBAB38

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

1000.00

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

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

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

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATION, MUSCOGEE CREEK, , ,

A. Mailing Address PO BOX 580

City
OKMULGEE

State
OK

Zip Code
74447-0580

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
N/A

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 29 2025

Transaction ID : ABE06D4862DB9469DAC1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATION, ONEIDA INDIAN, , ,

B. Mailing Address 2037 DREAM CATCHER PLZ

City
ONEIDA

State
NY

Zip Code
13421-2729

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
N/A

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 21 2025

Transaction ID : A75A8D8A100FB4C9D8AA

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NESSEL, ARIEL, , ,

C. Mailing Address PO BOX 1128

City
ROSS

State
CA

Zip Code
94957

FEC ID number of contributing
federal political committee.

C

Name of Employer
NESSEL DEVELOPMENT

Occupation
ENTREPRENEUR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2025

Transaction ID : A6F5D3B1A49DA4C65A5E

Amount of Each Receipt this Period

1250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

5750.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2025

Transaction ID : AC5FC9CF76A3440D9B58

Amount of Each Receipt this Period

1250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)
OF CHIPPEWA INDIANS D/B/A BLUE, TURTLE MOUNTAIN BAND, , ,

Mailing Address 1110 HOSPITAL LOOP

City
BELCOURTState
NDZip Code
58316-7700FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

N/A

N/A

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 12 2025

Transaction ID : ACC1D4740AFBB4412B64

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)
OF NC, LUMBEE TRIBE, , ,

Mailing Address 6894 NC HWY 711 W

City
PEMBROKEState
NCZip Code
28372FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

N/A

N/A

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 14 2025

Transaction ID : AF8321FE124BB4C4B8E4

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

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

NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

OF UPPER LAKE, HABEMATOLEL POMO, , ,

A. Mailing Address PO BOX 516City
UPPER LAKEState
CAZip Code
95485-0516FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
N/A

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 18 2025

Transaction ID : A2C049D3C1946409C819

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RABON, TREY, , ,

B. Mailing Address 4233 GREEN DRAKE DRCity
WAKE FORESTState
NCZip Code
27587-9821FEC ID number of contributing
federal political committee.

C

Name of Employer
AT&TOccupation
EXECUTIVE

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
04 11 2025

Transaction ID : A43FADF09992E48509A2

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 11 2025

Transaction ID : A35F997BC9579404D801

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 57 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

RAWL, JULIAN, WHITE, ,

A.

Mailing Address PO BOX 8068

City

GREENVILLE

State

NC

Zip Code

27835-8068

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
REAL ESTATE DEVELOPER

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
05 13 2025

Transaction ID : AFFB1B081A5E84B08914

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REEL, DYLAN, ,

B.

Mailing Address 317 SUMMIT OVERLOOK DR

City

CLAYTON

State

NC

Zip Code

27527-8519

FEC ID number of contributing
federal political committee.

C

Name of Employer
KILPATRICK TOWNSEND STOCKTON

Occupation
LAWYER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 09 2025

Transaction ID : ABB018622E2954998B85

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

C.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 09 2025

Transaction ID : A2CB71648E91D48129E3

Amount of Each Receipt this Period

260.25

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

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

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

1760.25

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

REGAN, GARTH, , ,

A.

Mailing Address 299 RIVERBEND DR

City

ADVANCE

State

NC

Zip Code

27006-8501

FEC ID number of contributing
federal political committee.

C

Name of Employer

ATRIUM HEALTH

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y
04 11 2025

Transaction ID : A8AC297491D474C1DB37

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 11 2025

Transaction ID : A5D2A9F17B2B646159CB

Amount of Each Receipt this Period

260.25

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

RHYNE, HEATHER, , ,

C.

Mailing Address 696 SPRING SIDE DR

City

LINCOLNTON

State

NC

Zip Code

28092-8539

FEC ID number of contributing
federal political committee.

C

Name of Employer

FALLSTON PHARMACY

Occupation

PHARMACIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 11 2025

Transaction ID : A68F287D12EB44D5EB8E

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

510.25

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AAFD836BBC35F408785C

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

RIEMER, CLARK, , ,

Mailing Address 412 WAYFIELD LN

City

CARY

State

NC

Zip Code

27518-6371

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

Name of Employer

MAYNARD NEXSEN

Occupation

GOVERNMENT AFFAIRS SPECIALIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A705BBB5747574D6A8C8

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A73B52EBC3870409F937

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

500.00

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBRENO, ANDREW, , ,

A. Mailing Address 528 TOBACCO QUAY

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAPITOL67 STRATEGIES

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : AAB889B50CF3B4E72A82

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B. Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A02F81830B7C648C7958

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ROSENBURGH, STEPHEN, , ,

C. Mailing Address 14822 RESOLVES LN

City

CHARLOTTE

State

NC

Zip Code

28277-3029

FEC ID number of contributing
federal political committee.

C

Name of Employer

US DEVELOPMENTS

Occupation

MANAGER

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1041.02

Date of Receipt

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

Transaction ID : A514E55D0EEF54675ABE

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1541.02

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AF08B9DA266244BBDA4D

Amount of Each Receipt this Period

1041.02

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

SAMPSON, JARETTE, LEE, ,

Mailing Address 41 CHAYLEAJACE DRIVE

City

PEMBROKE

State

NC

Zip Code

28372-1018

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

Name of Employer

Occupation

DIAL INSURANCE

INSURANCE

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A8A9A12ABED3C4A0B8FB

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AB2A4924D79CC4DED888

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 62 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

SHAHEEN, LAWRENCE, , ,

A.

Mailing Address 4440 CANOE BROOK RD

City

CHARLOTTE

State

NC

Zip Code

28210

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 28 2025

Transaction ID : AF36FE6B472344DE5B62

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
05 28 2025

Transaction ID : AA8C3B2EAAA704013A30

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

SHEARER, TORREY, , ,

C.

Mailing Address 55 W ST NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

JTI LIGGETT

Occupation

HEAD OF FEDERAL GOVERNMENT AFFAIRS

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 24 2025

Transaction ID : AC7511C7BE2494895B15

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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)

PAGE 63 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

Transaction ID : AE2431715455F4912BFF

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)

SHOLAR, ADAM, , ,

Mailing Address 2209 WHITE OAK RD

City

RALEIGH

State

NC

Zip Code

27608-1453

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

Name of Employer

NC HEALTH CARE FACILITIES ASSOCIATION

Occupation

PRESIDENT/CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A2D614E7E3BBD4F00A76

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A7F11705EF784408586D

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)

PAGE 64 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

SINDERS, GREGG, , ,

A.

Mailing Address 108 HARDY IVY WAY

City
HOLLY SPRINGSState
NCZip Code
27540FEC ID number of contributing
federal political committee.

C

Name of Employer
CHARTER ONEOccupation
EDUCATION

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : AE53A2D38CA584FEDA41

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

B.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : AEECA5DE31CD24F62894

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

SKVARLA, JOHN, , ,

Mailing Address 6525 CARNEGIE BLVD

City
CHARLOTTEState
NCZip Code
28211-3561FEC ID number of contributing
federal political committee.

C

Name of Employer
SAM, LLCOccupation
MEMBER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 05 2025

Transaction ID : AA6E96C75222F4F6E8AE

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

3750.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AAF7CA61F78D84EF382B

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

SKVARLA, JOHN, ,

Mailing Address 6525 CARNEGIE BLVD

City
CHARLOTTEState
NCZip Code
28211-3561FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

SAM, LLC

MEMBER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A8542015F335A4BC38D7

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A9365D2900EC04A78B2A

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

3500.00

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

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

SNYDER, JOHN, , ,

A.

Mailing Address 9431 SARDIS GLEN DRIVE

City

MATTHEWS

State

NC

Zip Code

28105

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROSPERING SOLUTIONS

Occupation

GOVERNMENT RELATIONS

Receipt For: 2026

☒

Primary

☐

General

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 07 2025

Transaction ID : A9009AAD3E20F4443BCF

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
06 07 2025

Transaction ID : A835413A42615400992B

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

SPENCER, DAVID, , ,

C.

Mailing Address 901 FAIRWAY DRIVE

City

HIGH POINT

State

NC

Zip Code

27262

FEC ID number of contributing
federal political committee.

C

Name of Employer

PINNACLE FINANCIAL PARTNERS

Occupation

CIO

Receipt For: 2026

☒

Primary

☐

General

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A89D066C0E8B64E6BAA0

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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)

PAGE 67 OF 205

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

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

NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED**A.** Mailing Address PO BOX 9891City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AA8F5C4A873764F8295B

Amount of Each Receipt this Period

250.00

☒ Memo Item
INTERMEDIARYTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)
STARNES, BRYAN, , ,

Mailing Address 4486 WIKE ROAD

City
GRANITE FALLSState
NCZip Code
28630FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
CFO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3643.56

Date of Receipt

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

Transaction ID : AE14C971751604689965

Amount of Each Receipt this Period

3643.56

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A8FB1D9BA2EFF456FA22

Amount of Each Receipt this Period

3643.56

☒ Memo Item
INTERMEDIARYTOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

3643.56

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 68 OF 205

☒ 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)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

STEWART, DOUGLAS, , ,

A.

Mailing Address 710 GLENWOOD AVE

City
RALEIGH

State
NC

Zip Code
27605-1508

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE STEWART GROUP, INC.

Occupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 14 2025

Transaction ID : AC10EEEC5E23C4D43B7D

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 14 2025

Transaction ID : A8F52B064E35342C5B17

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

THOMAS, AARON, , ,

C.

Mailing Address 763 COMTECH DR.

City
PEMBROKE

State
NC

Zip Code
28372

FEC ID number of contributing
federal political committee.

C

Name of Employer
METCON

Occupation
GC

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 14 2025

Transaction ID : A7858EE4EFCB439CACA

Amount of Each Receipt this Period

3500.00

☐ Memo Item

3750.00

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

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)

PAGE 69 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS, AZALEA, , ,

A.

Mailing Address PO BOX 1241

City

PEMBROKE

State

NC

Zip Code

28372-1241

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPEECH SOLUTIONSOccupation
SPEECH THERAPIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A022373266A734AF893B

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

THOMAS, AZALEA, , ,

Mailing Address PO BOX 1241

City

PEMBROKE

State

NC

Zip Code

28372-1241

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPEECH SOLUTIONSOccupation
SPEECH THERAPIST

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A3665CC11FF864C7B89F

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A6A7E9DDE6DE14ECEB2E

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

7000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS, PHILIP, R, ,

A.

Mailing Address 309 W PARK DR

City
RALEIGHState
NCZip Code
27605-1741FEC ID number of contributing
federal political committee.

C

Name of Employer
CHALMERS, ADAM, BACKER, KAUFMANOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 14 2025

Transaction ID : A9D164EABB7964AF2A45

Amount of Each Receipt this Period

250.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

TREFZGER, CHARLIE, , ,

Mailing Address 29 37TH AVE NW

City
HICKORYState
NCZip Code
28630FEC ID number of contributing
federal political committee.

C

Name of Employer
ALG SENIOROccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3643.56

Date of Receipt

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

Transaction ID : AB661798220854A689D6

Amount of Each Receipt this Period

3643.56

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A137F4E2EE1264F53B69

Amount of Each Receipt this Period

3643.56

☒ Memo Item

INTERMEDIARY

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

3893.56

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

PAGE 71 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

TUTTLE, MIKE, , ,

A.

Mailing Address 6941 COLONIAL CLUB DRIVE

City

THOMASVILLE

State

NC

Zip Code

27360

FEC ID number of contributing
federal political committee.

C

Name of Employer

IIG

Occupation

SALES

Receipt For: 2026

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AB4E1BB9AB3CF4CB7A81

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 PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A540BEAEB32B8461D98E

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)

TUTTLE, MIKE, , ,

Mailing Address 6941 COLONIAL CLUB DRIVE

City

THOMASVILLE

State

NC

Zip Code

27360

FEC ID number of contributing
federal political committee.

C

Name of Employer

IIG

Occupation

SALES

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AD6BB286A9B574626949

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

5000.00

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

PAGE 72 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AACEC6E411BF54F3BA07

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

UNDERWOOD, EDWIN, , ,

Mailing Address 2714 STUTTS ROAD

City

ASHEBORO

State

NC

Zip Code

27205

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

Name of Employer

MARSH FURNITURE

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A95775C46498344F99A0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A99DD5A7A62C9424BA55

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 73 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

VAKERICS, MITCH, , ,

A.

Mailing Address 1634 NORTH ABINGDON STREET

City
ARLINGTON

State
VA

Zip Code
22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
VERITAS HEALTH POLICY

Occupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 23 2025

Transaction ID : A7FC8AEA23E5D421E8EF

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 23 2025

Transaction ID : ADC0533FC43A448E4A7C

Amount of Each Receipt this Period

520.51

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

VAUGHAN, FREDERICK, , ,

C.

Mailing Address 410 OAKLAWN AVENUE

City
WINSTON-SALEM

State
NC

Zip Code
27104

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHECKMATE GOVERNMENT RELATIONS LL

Occupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A7421FB5BABC246C5ABA

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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

4020.51

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

PAGE 74 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED**A.** Mailing Address PO BOX 9891City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A2B61F0D1C42442F7815

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)
VON CANON, FRED, , ,**B.** Mailing Address 1336 RESERVOIR VIEW LNCity
WAKE FORESTState
NCZip Code
27587-1836FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A218E59270205444F901

Amount of Each Receipt this Period

2000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
WANG, MICHAEL, , ,**C.** Mailing Address 5233 BEVINGTON PLCity
CHARLOTTEState
NCZip Code
28277-5504FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : AF7CD5DD0379442DDB2F

Amount of Each Receipt this Period

1500.00

☐ 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:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED**A.** Mailing Address PO BOX 9891City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A07078E95284340DEA6F

Amount of Each Receipt this Period

1500.00

☒ Memo Item

INTERMEDIARY

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

Mailing Address 7004 LONE OAK PL

City
RALEIGHState
NCZip Code
27615-5453FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

HTR COMMERCIAL

BROKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AAEB7EF5F455B4E6DA5D

Amount of Each Receipt this Period

250.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)
WARD, ROBERT, E, ,

Mailing Address 7004 LONE OAK PL

City
RALEIGHState
NCZip Code
27615-5453FEC ID number of contributing
federal political committee.**C**Name of Employer
HTR COMMERCIALOccupation
BROKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AD6A7BD078A1F452FB8B

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : A4C98EDC265CA4058912

Amount of Each Receipt this Period

250.00



Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

WHITE, HAYWOOD, , ,

Mailing Address 1404 OLD LAMPLIGHTER WAY

City

WILMINGTON

State

NC

Zip Code

28403

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

Name of Employer

Occupation

SELF

ATTORNEY

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A540F02F3D14A4A81A3D

Amount of Each Receipt this Period

500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : ABF847768818D4A91821

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

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

500.00

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILKINSON, KEVIN, , ,

A. Mailing Address 4900 SKIDMORE STCity
RALEIGHState
NCZip Code
27609-4516FEC ID number of contributing
federal political committee.

C

Name of Employer
THE SOUTHERN GROUPOccupation
LOBBYIST

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		18		2025

Transaction ID : A200E28BDB85F4435B84

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		18		2025

Transaction ID : A8598E8CEDB5B4BEC94A

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

WILKINSON, KEVIN, , ,

C. Mailing Address 4900 SKIDMORE STCity
RALEIGHState
NCZip Code
27609-4516FEC ID number of contributing
federal political committee.

C

Name of Employer
THE SOUTHERN GROUPOccupation
LOBBYIST

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		18		2025

Transaction ID : AD9BFF48131B44325BCA

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

7000.00

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

PAGE 78 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	5

Transaction ID : ADD6EF28F2F1B4DE19C9

Amount of Each Receipt this Period

3500.00

☒

Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

YESSIN, BRENT, , ,

Mailing Address 3215 W PARKLAND BLVD

City

TAMPA

State

FL

Zip Code

33609

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

Name of Employer

Occupation

YESSIN ASSOC

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		3	0		2	0	2	5

Transaction ID : A3A55A81786034020971

Amount of Each Receipt this Period

1000.00

☐

Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

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

Transaction ID : AB842B97B53B0464FB9D

Amount of Each Receipt this Period

1000.00

☒

Memo Item

INTERMEDIARY

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

1000.00

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

PAGE 79 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

ZAFFIRINI, CARLOS, , ,

A.

Mailing Address 401 W 15TH ST SUITE 840

City
AUSTINState
TXZip Code
78701FEC ID number of contributing
federal political committee.

C

Name of Employer
AHCVOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A7BF24E9B43AF4107AAC

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

B.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

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

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A02F4838D722D42AB96D

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

ZIEGLER, DANIEL, A, ,

Mailing Address 5439 SUMMER LEAF LN

City
ALEXANDRIAState
VAZip Code
22312-3923FEC ID number of contributing
federal political committee.

C

Name of Employer
WILLIAMS AND JENSENOccupation
PRINCIPAL

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 27 2025

Transaction ID : A93B4CCDA2666404CAB2

Amount of Each Receipt this Period

2000.00

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

5500.00

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

221064.05

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALLIED PILOTS ASSOCIATION PACMailing Address 14600 TRINITY BLVD
STE 500City
FORT WORTHState
TXZip Code
76155-2559FEC ID number of contributing
federal political committee.**C** C00267849

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		24		2025

Transaction ID : ABB2BD005C4794C8796E

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMALGAMATED SUGAR COMPANY PACMailing Address 1951 S SATURN WAY
STE 100City
BOISEState
IDZip Code
83709-2924FEC ID number of contributing
federal political committee.**C** C00326389

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2025

Transaction ID : AF1D69C43DE134961BB0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES INC. PACMailing Address 1200 17TH ST NW
STE 400City
WASHINGTONState
DCZip Code
20036-3012FEC ID number of contributing
federal political committee.**C** C00107300

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		20		2025

Transaction ID : A6BD81ABD36FD4346A09

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN REVIVAL PAC

A.

Mailing Address C/O 228 S. WASHINGTON ST.
STE. 115

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.

C C00639229

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
06 / 30 / 2025D D / Y Y Y Y Y
30 / 2025Y Y Y Y Y
2025

Transaction ID : A40E1C293CE714C58BC6

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

BULLDOG PAC

Mailing Address 228 S WASHINGTON ST
STE 115

City

ALEXANDRIA

State

VA

Zip Code

22314-5404

FEC ID number of contributing
federal political committee.

C C00672733

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
06 / 30 / 2025D D / Y Y Y Y Y
30 / 2025Y Y Y Y Y
2025

Transaction ID : ACCB750B792C84E9A90E

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

CAMBIA HEALTH SOLUTIONS PAC

Mailing Address 200 SW MARKET ST

City

PORTLAND

State

OR

Zip Code

97201-5715

FEC ID number of contributing
federal political committee.

C C00252684

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 27 / 2025D D / Y Y Y Y Y
27 / 2025Y Y Y Y Y
2025

Transaction ID : A2E36DA20DFDB480A9F7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

8500.00

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

COMMITTEE FOR ADVANCEMENT OF COTTON**A.**

Mailing Address PO BOX 2995

City
CORDOVAState
TNZip Code
38088-2995FEC ID number of contributing
federal political committee.**C** C00023028

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A176C7DE05E7C45B2B33

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT VICKIE SAWYER**B.**

Mailing Address PO BOX 97275

City
RALEIGHState
NCZip Code
27624-7275FEC 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	3		2	0	2	5

Transaction ID : AB0B0A6F342A441F6A06

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COUNCIL OF INSURANCE AGENTS & BROKERS PAC**C.**Mailing Address 701 PENNSYLVANIA AVE NW
STE 750City
WASHINGTONState
DCZip Code
20004-2661FEC ID number of contributing
federal political committee.**C** C00039578

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A24BB6ECDF5E74224B43

Amount of Each Receipt this Period

2500.00

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

6000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

CRH AMERICAS, INC. PAC

A.Mailing Address 11714 WILSON PARKE AVE
STE 155City
AUSTINState
TXZip Code
78726-4061FEC ID number of contributing
federal political committee.**C** C00346353

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A2BA8C4B5F00848CCA14

Amount of Each Receipt this Period

3000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CRH AMERICAS, INC. PAC

Mailing Address 11714 WILSON PARKE AVE
STE 155City
AUSTINState
TXZip Code
78726-4061FEC ID number of contributing
federal political committee.**C** C00346353

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A5667279EC234420C848

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

CROP INSURANCE PROFESSIONALS ASSOCIATION PAC

Mailing Address 228 S WASHINGTON ST
STE 115City
ALEXANDRIAState
VAZip Code
22314-5404FEC ID number of contributing
federal political committee.**C** C00503680

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 23 2025

Transaction ID : A60D154BCF4F548BBBE9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

6000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

ECOLAB INC. PAC

A.

Mailing Address 1 ECOLAB PL

City

SAINT PAUL

State

MN

Zip Code

55102-2739

FEC ID number of contributing
federal political committee.**C** C00101485

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		2	0		2	0	5	

Transaction ID : AB73CA50C2E274EB9ADA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

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 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AE7AA9C9D6C3E4384AEF

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ERNST & YOUNG PAC

C.

Mailing Address 1101 NEW YORK AVE NW

City

WASHINGTON

State

DC

Zip Code

20005-4269

FEC ID number of contributing
federal political committee.**C** C00227744

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A736C5DEAD9524BDEBD7

Amount of Each Receipt this Period

2500.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

EYE OF THE TIGER PAC**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.**C** C00467431

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : AD0C8674A2E44450FBD3

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

EYE OF THE TIGER PAC

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.**C** C00467431

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : AA4D7CA2AAA8548A298D

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

FIRST IN FREEDOM PACMailing Address 824 MILLEDGE CIR
STE 101

City

ATHENS

State

GA

Zip Code

30606

FEC ID number of contributing
federal political committee.**C** C00540146

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A0DA9E6069CC44D0A9E6

Amount of Each Receipt this Period

2500.00

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

12500.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

FLORIDA SUGAR CANE LEAGUE PACMailing Address 1301 PENNSYLVANIA AVE NW
STE 401City
WASHINGTONState
DCZip Code
20004-1701FEC ID number of contributing
federal political committee.**C** C00012328

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	8		2	0	2	5

Transaction ID : AE3564C6A91264457AB9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRATERNITY & SORORITY POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 40383

City
WASHINGTONState
DCZip Code
20016FEC ID number of contributing
federal political committee.**C** C00410068

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		2	7		2	0	2	5

Transaction ID : A805C1B62A47F43F8BE2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GENERAL DYNAMICS CORPORATION PAC

Mailing Address 11011 SUNSET HILLS RD

City
RESTONState
VAZip Code
20190-5311FEC ID number of contributing
federal political committee.**C** C00078451

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	0		2	0	2	5

Transaction ID : AE7A1AD8E28A840A8874

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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(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

GUIDEWELL PAC

A.

Mailing Address 4800 DEERWOOD CAMPUS PKWY

City
JACKSONVILLEState
FLZip Code
32246-6498FEC ID number of contributing
federal political committee.**C** C00161141

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA727A2491B9A48FF8AF

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

HARDWOOD FEDERATION PAC, INC.

Mailing Address 601 13TH ST NW
STE 1000NCity
WASHINGTONState
DCZip Code
20005-6713FEC ID number of contributing
federal political committee.**C** C00396671

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		2	9		2	0	2	5

Transaction ID : A679972008F8A4B078F9

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

HELP ELECT REPUBLICANS NOW

Mailing Address 555 METRO PL S
STE 525City
DUBLINState
OHZip Code
43017-5316FEC ID number of contributing
federal political committee.**C** C00692715

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	5

Transaction ID : A6649CC1955FE40EF9C8

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESSFull Name (Last, First, Middle Initial)
HOUSE CONSERVATIVES FUND**A.**

Mailing Address 228 S. WASHINGTON ST., STE. 115

City
ALEXANDRIAState
VAZip Code
22314FEC ID number of contributing
federal political committee.**C** C00326439

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		2	4		2	0	5	

Transaction ID : A1B3E6CD263E84BD5969

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
INDEPENDENT PILOTS ASSOCIATION PAC**B.**

Mailing Address 3607 FERN VALLEY RD

City
LOUISVILLEState
KYZip Code
40219-1916FEC ID number of contributing
federal political committee.**C** C00849323

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		2	9		2	0	5	

Transaction ID : AE75DBAF7F3D14A8D99F

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
KOCH PAC**C.**

Mailing Address 4111 E 37TH ST N

City
WICHITAState
KSZip Code
67220-3203FEC ID number of contributing
federal political committee.**C** C00236489

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		2	7		2	0	5	

Transaction ID : ADFB31ADED8F491AA8

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

MAYNARD NEXSEN PAC

A.

Mailing Address 1901 6TH AVE N

STE 2400

City

BIRMINGHAM

State

AL

Zip Code

35203-4604

FEC ID number of contributing
federal political committee.**C** C00272724

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		2	8		2	0	2	5

Transaction ID : ABC5A5774FC4940D9959

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MINN-DAK FARMERS COOPERATIVE SUGAR PAC

B.

Mailing Address 7525 RED RIVER RD

City

WAHPETON

State

ND

Zip Code

58075-9705

FEC ID number of contributing
federal political committee.**C** C00164939

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		2	9		2	0	2	5

Transaction ID : AF2E87C3FEE884685A9F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL APARTMENT ASSOCIATION PAC

C.

Mailing Address 4300 WILSON BLVD

STE 800

City

ARLINGTON

State

VA

Zip Code

22203-4213

FEC ID number of contributing
federal political committee.**C** C00113241

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	0		2	0	2	5

Transaction ID : AEB05B3FAD01643718C7

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL CHICKEN COUNCIL PAC**A.**Mailing Address 1152 15TH ST NW
STE 430City
WASHINGTONState
DCZip Code
20005-1790FEC ID number of contributing
federal political committee.**C** C00034272

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2025

Transaction ID : A6C85B2D0D8CB465C86B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS PAC**B.**

Mailing Address PO BOX 1090

City
CHERRYVILLEState
NCZip Code
28021-1090FEC ID number of contributing
federal political committee.**C** C00405555

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2025

Transaction ID : A3A8EACD8D0B04F1B834

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		27		2025

Transaction ID : A65D49CDA3AD64D66AFF

Amount of Each Receipt this Period

2500.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

NC COTTON PRODUCERS ASSOCIATION COMMITTEE**A.**

Mailing Address PO BOX 656

City
NASHVILLEState
NCZip Code
27856-0656FEC ID number of contributing
federal political committee.**C** C00416297

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		1	7		2	0	2	5

Transaction ID : A0F0D2D7191014E979A6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NC PEANUT GROWERS ASSOCIATION PAC**B.**

Mailing Address PO BOX 8

City
NASHVILLEState
NCZip Code
27856-0008FEC ID number of contributing
federal political committee.**C** C00185652

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		1	7		2	0	2	5

Transaction ID : AEB1CD2F1C1DC44FB80F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NC SOYBEAN PRODUCERS ASSOCIATION NC SOYPAC**C.**Mailing Address 3600 HAWORTH DR
STE 2City
RALEIGHState
NCZip Code
27609-7225FEC ID number of contributing
federal political committee.**C** C00491456

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		1	7		2	0	2	5

Transaction ID : AA4F56D146A5A4A5D9C1

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

NETJETS INC. PAC

A.

Mailing Address 4111 BRIDGEWAY AVE

City
COLUMBUSState
OHZip Code
43219-1882FEC ID number of contributing
federal political committee.**C** C00481309

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		2	9		2	0	2	5

Transaction ID : AB5E84B8DC1334A93842

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PLAINS COTTON GROWERS INC. PAC

B.

Mailing Address 8303 ABERDEEN AVE

City
LUBBOCKState
TXZip Code
79424-3453FEC ID number of contributing
federal political committee.**C** C00599084

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		2	9		2	0	2	5

Transaction ID : A11E2177A558F4C3AB2C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PRIME THERAPEUTICS LLC PAC

C.

Mailing Address 1305 CORPORATE CENTER DR

City
EAGANState
MNZip Code
55121-1204FEC ID number of contributing
federal political committee.**C** C00498105

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		2	0		2	0	2	5

Transaction ID : A91A5179EB6944D34B46

Amount of Each Receipt this Period

1000.00

☐ Memo Item

3000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

PROTECTIVE LIFE CORPORATION FEDERAL PAC**A.**

Mailing Address PO BOX 2606

City

BIRMINGHAM

State

AL

Zip Code

35202-2606

FEC ID number of contributing
federal political committee.**C** C00161414

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A75ED4F2E1BCE4EB2B51

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

RAY PICKETT CAMPAIGN ACCOUNT

Mailing Address PO BOX 265

City

BLOWING ROCK

State

NC

Zip Code

28605-0265

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AC36C615BED2B423088B

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC

Mailing Address P. O. BOX 718

City

WINSTON SALEM

State

NC

Zip Code

27102

FEC ID number of contributing
federal political committee.**C** C00042002

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		2	0		2	0	2	5

Transaction ID : A10A8E2F014AE4C54A7E

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

SCALISE FOR CONGRESS**A.**

Mailing Address PO BOX 23219

City

NEW ORLEANS

State

LA

Zip Code

70183-0219

FEC ID number of contributing
federal political committee.**C** C00394957

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A0DA148FF738942989D0

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

SCALISE FOR CONGRESS

Mailing Address PO BOX 23219

City

NEW ORLEANS

State

LA

Zip Code

70183-0219

FEC ID number of contributing
federal political committee.**C** C00394957

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : AA936991975D241C9BDE

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.**Full Name (Last, First, Middle Initial)
SEAL PACMailing Address 824 MILLEDGE CIR
STE 101

City

ATHENS

State

GA

Zip Code

30606

FEC ID number of contributing
federal political committee.**C** C00570226

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	5		2	9		2	0	5	

Transaction ID : A655F4F02466E4647B0D

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:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

SECC COTTON GROWERS INC./SE COTTON GINNERS ASSNMailing Address 139 PROMINENCE CT
STE 110City
DAWSONVILLEState
GAZip Code
30534-8940FEC ID number of contributing
federal political committee.**C** C00300426

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		2	9		2	0	2	5

Transaction ID : AB4F80F5E2F974D4A997

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SUGAR CANE GROWERS COOPERATE OF FLORIDA (PAC)

Mailing Address 1500 GEORGE WEDGWORTH WAY

City
BELLE GLADEState
FLZip Code
33430-5400FEC ID number of contributing
federal political committee.**C** C00254656

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A6927039EFDD042468C9

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SYNGENTA CORPORATION PACMailing Address 3411 SILVERSIDE RD
STE 100City
WILMINGTONState
DEZip Code
19810-4811FEC ID number of contributing
federal political committee.**C** C00363945

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A013F5565511F4D99A63

Amount of Each Receipt this Period

2500.00

☐ Memo Item

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 OF 205

(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

THE CENTER FOR INTERNATIONAL EDUCATION INC PAC**A.**Mailing Address 201 SAGE RD
STE 200City
CHAPEL HILLState
NCZip Code
27514-6510FEC ID number of contributing
federal political committee.**C** C00659508

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
05 28 2025

Transaction ID : A4C742981BD8840988F8

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED**B.**

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

279009.72

Date of Receipt

M M / D D / Y Y Y Y Y
05 28 2025

Transaction ID : A44FA9C86798342069B0

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

THE CIGNA GROUP EMPLOYEE PAC**C.**Mailing Address 701 PENNSYLVANIA AVE NW
STE 720City
WASHINGTONState
DCZip Code
20004-2626FEC ID number of contributing
federal political committee.**C** C00085316

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
05 29 2025

Transaction ID : A3EB84B9EF57B4839B6B

Amount of Each Receipt this Period

2500.00

☐ Memo Item

3000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

THE CIGNA GROUP EMPLOYEE PACMailing Address 701 PENNSYLVANIA AVE NW
STE 720City
WASHINGTONState
DCZip Code
20004-2626FEC ID number of contributing
federal political committee.**C** C00085316

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A8E9BE6B176B54E30AAE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE HOME DEPOT PACMailing Address 1155 F ST NW
STE 400City
WASHINGTONState
DCZip Code
20004-1346FEC ID number of contributing
federal political committee.**C** C00284885

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AB5D4FAE2CB244C1BB5C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE PREMIER, INC. EMPLOYEE'S CIVIC ACTION FUNDMailing Address 200 MASSACHUSETTS AVE NW
STE 330City
WASHINGTONState
DCZip Code
20001-1429FEC ID number of contributing
federal political committee.**C** C00346288

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		2	9		2	0	2	5

Transaction ID : A28A8CA6B76D94E6DB4E

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

THE SURETY AND FIDELITY ASSOCIATION OF AMERICA PAC**A.**Mailing Address 1140 19TH ST NW
STE 500City
WASHINGTONState
DCZip Code
20036-6617FEC ID number of contributing
federal political committee.**C** C00691618

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AD690353B2D0D4441B89

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THINK BIG AMERICA PAC**B.**

Mailing Address PO BOX 341027

City
AUSTINState
TXZip Code
78734-0018FEC ID number of contributing
federal political committee.**C** C00573519

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A333C57F2C6714BAF9D3

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TRANSPORTATION INTERMEDIARIES ASSOCIATION PAC**C.**Mailing Address 1900 DUKE ST
STE 300City
ALEXANDRIAState
VAZip Code
22314-3498FEC ID number of contributing
federal political committee.**C** C00335091

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		1	7		2	0	2	5

Transaction ID : A8B4FF158953A45289E4

Amount of Each Receipt this Period

1000.00

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

8500.00

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

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

US PEANUT PAC

A.

Mailing Address 313 MASSACHUSETTS AVE NE

City

WASHINGTON

State

DC

Zip Code

20002-5701

FEC ID number of contributing
federal political committee.**C** C00502807

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		2	9		2	0	2	5

Transaction ID : A910929A0485C4361B0D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

USA RICE FEDERATION PAC

B.Mailing Address 2101 WILSON BLVD
STE 610

City

ARLINGTON

State

VA

Zip Code

22201-3040

FEC ID number of contributing
federal political committee.**C** C00308478

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		2	9		2	0	2	5

Transaction ID : AE7131F35AD124A328B5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VIRGINIA FOXX FOR CONGRESS

C.

Mailing Address PO BOX 2676

City

BOONE

State

NC

Zip Code

28607-0718

FEC ID number of contributing
federal political committee.**C** C00386748

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A0DC0E3E229024639B7F

Amount of Each Receipt this Period

2000.00

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

4000.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

VULCAN MATERIALS COMPANY PAC**A.** Mailing Address 1200 URBAN CENTER DRCity
VESTAVIAState
ALZip Code
35242-2545FEC ID number of contributing
federal political committee.**C** C00116020

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		2	4		2	0	5	

Transaction ID : A28082CA65DAC4A92AF9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

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

1000.00

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

98500.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AIRBNB

Mailing Address 888 BRANNAN STREET

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
LODGING

002

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

566.32

Transaction ID : B8ECA4DEE7FF14012BBF

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ARISTOTLE

Mailing Address 205 PENNSYLVANIA AVE, SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2100.00

Transaction ID : BA9A324519663480BB52

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BEST BUY

Mailing Address 1980 GRIFFITH RD

City
WINSTON SALEMState
NCZip Code
27103-6440Purpose of Disbursement
AUDIO EQUIPMENT FOR INTERVIEWS

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

406.58

Transaction ID : BCBA5D3464697441A8A7

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

3072.90

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:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BEST BUY

Mailing Address 1980 GRIFFITH RD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

City
WINSTON SALEMState
NCZip Code
27103-6440

FEC Identification Number

CPurpose of Disbursement
VIDEO EQUIPMENT FOR INTERVIEWS

001

Amount of Each Disbursement this Period

213.99

Transaction ID : B751DFD0F30F4482F81B

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. BEST BUY

Mailing Address 1980 GRIFFITH RD

Date of Disbursement

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

City
WINSTON SALEMState
NCZip Code
27103-6440

FEC Identification Number

CPurpose of Disbursement
VIDEO EQUIPMENT FOR INTERVIEWS

001

Amount of Each Disbursement this Period

348.98

Transaction ID : B5FE714CC625D4E61879

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. BOBBY VAN'S STEAKHOUSE

Mailing Address 809 15TH ST NW

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20005

FEC Identification Number

CPurpose of Disbursement
FOOD/BEVERAGECategory/
Type

Amount of Each Disbursement this Period

604.90

Transaction ID : B6778A872CCF845C8A53

☐ Memo Item

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

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

1167.87

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FOOD/BEVERAGE

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

496.32

Transaction ID : BAE99B810928C4E26B72

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FOOD/BEVERAGE

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

946.67

Transaction ID : B0359F14C0C944D87AC1

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FOOD/BEVERAGE

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

291.90

Transaction ID : B9796682208D04E95B9C

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

1734.89

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. COSTCO

Mailing Address 1085 HANES MALL BLVD

City
WINSTON SALEMState
NCZip Code
27103-1310Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

365.32

Transaction ID : B133AA8D88E0D4E84BEE

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COSTCO

Mailing Address 1085 HANES MALL BLVD

City
WINSTON SALEMState
NCZip Code
27103-1310Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

336.08

Transaction ID : BDF1C189C83D04325B8E

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CUBESMART

Mailing Address 4700 COMMERCIAL PARK CT

City
CLEMMONSState
NCZip Code
27012-8700Purpose of Disbursement
STORAGE UNIT FOR CAMPAIGN SIGNS

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

61.00

Transaction ID : BBDE10FC18F904AB5838

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

762.40

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CUBESMART

Mailing Address 4700 COMMERCIAL PARK CT

Date of Disbursement

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

City
CLEMMONSState
NCZip Code
27012-8700

FEC Identification Number

C

Purpose of Disbursement
STORAGE UNIT FOR CAMPAIGN SIGNS

001

Amount of Each Disbursement this Period

61.00

Transaction ID : BB207B83288FC49008C7

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. CUBESMART

Mailing Address 4700 COMMERCIAL PARK CT

Date of Disbursement

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

City
CLEMMONSState
NCZip Code
27012-8700

FEC Identification Number

C

Purpose of Disbursement
STORAGE UNIT FOR CAMPAIGN SIGNS

001

Amount of Each Disbursement this Period

61.00

Transaction ID : B64A8190283B44C01A92

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. DOOR DASHMailing Address 303 2ND ST
STE 800

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94107-1366

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

76.35

Transaction ID : BCC978AE01CDD4509A64

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

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

198.35

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

29.24

Transaction ID : B54D91F1333F44FCF90A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

59.53

Transaction ID : BCCBCD4A49BD3471D8EC

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35.13

Transaction ID : BF557227ADBA24D8C9A9

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

123.90

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:
(check only one)

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.72

Transaction ID : B947E786C369748A5A4F

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

33.14

Transaction ID : BD13E17A5901042CC967

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

201.59

Transaction ID : B46F454D31B8B4437813

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

275.45

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

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

83.14

Transaction ID : B1D18268B3ECB4BF3B98

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

27.63

Transaction ID : B1EEA3C84AAD44AAABDB

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

81.61

Transaction ID : B5D5B7D1EC7B0463099E

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

192.38

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

50.34

Transaction ID : B3F5FD79A71E04C24AFB

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

18.05

Transaction ID : B9D77A4B792F0468E810

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

52.93

Transaction ID : B1E6AADB5DF541DB981

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

121.32

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 110 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

24.72

Transaction ID : B050BCFB0BDEF4C4BB25

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

62.02

Transaction ID : BDC18F5E1CC6E4197909

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

69.47

Transaction ID : BA7D4BA625DB74AC58CF

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

156.21

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 111 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

68.12

Transaction ID : BAE232ED305D3419EAD7

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

82.20

Transaction ID : BD823A7207B9145A3859

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

55.93

Transaction ID : B591BE8F0B5EE40559A6

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

206.25

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

47.28

Transaction ID : B4DDF996A73144840B99

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.10

Transaction ID : BB5EC0508B15344BE8E2

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

45.38

Transaction ID : B502FE05BBEDF47A1BBD

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

122.76

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

42.24

Transaction ID : B9CDECE994192429C947

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

41.33

Transaction ID : B1E64E90B993A473EA23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DOOR DASHMailing Address 303 2ND ST
STE 800City
SAN FRANCISCOState
CAZip Code
94107-1366Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

33.98

Transaction ID : B4391787D4C294247A29

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

117.55

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 114 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FIRST CITIZENS BANK

Mailing Address 2005 CLARK AVENUE

City
RALEIGHState
NCZip Code
27605-1603Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : B52091091B8EC48588EC

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST CITIZENS BANK

Mailing Address 2005 CLARK AVENUE

City
RALEIGHState
NCZip Code
27605-1603Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : BAB0CD9C8DD744EA89C6

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST CITIZENS BANK

Mailing Address 2005 CLARK AVENUE

City
RALEIGHState
NCZip Code
27605-1603Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B4B5CA2591DE142D7BC0

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

40.00

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

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

PAGE 115 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FIRST CITIZENS BANK

Mailing Address 2005 CLARK AVENUE

City
RALEIGHState
NCZip Code
27605-1603Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B1D36B709E02B4326B58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST CITIZENS BANK

Mailing Address 2005 CLARK AVENUE

City
RALEIGHState
NCZip Code
27605-1603Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

16.00

Transaction ID : B2D81DEBEC29E4B00A8F

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST CITIZENS BANK

Mailing Address 2005 CLARK AVENUE

City
RALEIGHState
NCZip Code
27605-1603Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B4657E07EBDE44C87924

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

56.00

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

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

PAGE 116 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FIRST CITIZENS BANK

Mailing Address 2005 CLARK AVENUE

City
RALEIGHState
NCZip Code
27605-1603Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

16.00

Transaction ID : BA64DDAC429CF42E99CB

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST CITIZENS BANK

Mailing Address 2005 CLARK AVENUE

City
RALEIGHState
NCZip Code
27605-1603Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

16.00

Transaction ID : B71783E969A6C4DC8922

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FLEXPOINT CAMPAIGNS

Mailing Address PO BOX 1051

City
NEW ALBANYState
OHZip Code
43054Purpose of Disbursement
ONLINE/WEBSITE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

385.73

Transaction ID : B34B25EA80AEC4149850

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

417.73

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 117 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FLEXPOINT CAMPAIGNS

Mailing Address PO BOX 1051

City
NEW ALBANYState
OHZip Code
43054Purpose of Disbursement
ONLINE/WEBSITE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

385.81

Transaction ID : B7E9F17D8580D472AAAF

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GORDON RAMSAY HELL'S KITCHEN

Mailing Address 652 WHARF ST SW

City
WASHINGTONState
DCZip Code
20024-3590Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

206.70

Transaction ID : B9055875DB62D49DC87B

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GREEN VALLEY GRILL

Mailing Address 622 GREEN VALLEY RD

City
GREENSBOROState
NCZip Code
27408-7720Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

363.17

Transaction ID : B633F37A408654149B1A

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

955.68

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

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HORTON, JORDAN, , ,Mailing Address 1014 GRAYS LAND CT
APT 431City
KERNERSVILLEState
NCZip Code
27284-0064Purpose of Disbursement
CHILDCARE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

868.00

Transaction ID : B611CDDD2DBB64D8ABDB

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HORTON, JORDAN, , ,Mailing Address 1014 GRAYS LAND CT
APT 431City
KERNERSVILLEState
NCZip Code
27284-0064Purpose of Disbursement
CHILDCARE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1584.00

Transaction ID : B1E7241CE952C4D80B0B

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HYATT HOUSE RALEIGH

Mailing Address 11 SEABOARD AVE

City
RALEIGHState
NCZip Code
27604-1143Purpose of Disbursement
BALANCED OWED FOR FUNDRAISING EVENT

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7652.05

Transaction ID : B5F50332C693C4CF7B07

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

10104.05

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

349.64

Transaction ID : BFC1E95A77E4D4C7686E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

214.33

Transaction ID : B56281F109AF04901BF6

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

187.56

Transaction ID : B5F5D85BECC2240CB903

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

751.53

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

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

326.15

Transaction ID : B86895352DD354E2CBAA

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

254.63

Transaction ID : B5D480D3C518F4F789AA

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

186.89

Transaction ID : B67D80671E0C74CB0B3D

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

767.67

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

413.33

Transaction ID : BB5D9C1550ADA47C0A88

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

196.63

Transaction ID : B8A9E5BD9E67A478F90D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

23.46

Transaction ID : B0B5A58DB142642A9937

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

633.42

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

43.41

Transaction ID : BB042FE676A64446E93F

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

302.38

Transaction ID : B5924715B77E14A4E9CE

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INSTACARTMailing Address 50 BEALE STREET
SUITE 600City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

254.00

Transaction ID : B0530600596104E1EB8F

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

599.79

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 123 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2700 COAST AVE

Date of Disbursement

M M	D D	Y Y Y Y
04	01	2025

City
MOUNTAIN VIEWState
CAZip Code
94043-1140

FEC Identification Number

C

Purpose of Disbursement
ACCOUNTING SOFTWARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

85.00

Transaction ID : BF1A1CA7DA2B44116952

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 2700 COAST AVE

Date of Disbursement

M M	D D	Y Y Y Y
05	02	2025

City
MOUNTAIN VIEWState
CAZip Code
94043-1140

FEC Identification Number

C

Purpose of Disbursement
ACCOUNTING SOFTWARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

85.00

Transaction ID : BAC45B6AA1F2F4EA99E1

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. INTUIT

Mailing Address 2700 COAST AVE

Date of Disbursement

M M	D D	Y Y Y Y
06	02	2025

City
MOUNTAIN VIEWState
CAZip Code
94043-1140

FEC Identification Number

C

Purpose of Disbursement
ACCOUNTING SOFTWARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

85.00

Transaction ID : BE69668BB08994290933

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

255.00

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JOE'S SEAFOOD

Mailing Address 750 15TH ST NW

City
WASHINGTONState
DCZip Code
20005-1018Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

257.95

Transaction ID : BCA38124B13E541B4B00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LONGWORTH CAFETERIA

Mailing Address 15 INDEPENDENCE AVE SE

City
WASHINGTONState
DCZip Code
20515-6005Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

22.50

Transaction ID : B1D90820924574F5E912

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LONGWORTH CAFETERIA

Mailing Address 15 INDEPENDENCE AVE SE

City
WASHINGTONState
DCZip Code
20515-6005Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

15.20

Transaction ID : B2AE38C2FDBC247E8BA6

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

295.65

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)

PAGE 125 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LONGWORTH CAFETERIA

Mailing Address 15 INDEPENDENCE AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2025

City
WASHINGTONState
DCZip Code
20515-6005

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

2.45

Transaction ID : BD8E2B3FA429B4D2EA39

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. LONGWORTH CAFETERIA

Mailing Address 15 INDEPENDENCE AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2025

City
WASHINGTONState
DCZip Code
20515-6005

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

4.55

Transaction ID : BBE14C10C02894674B9F

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. LONGWORTH CAFETERIA

Mailing Address 15 INDEPENDENCE AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2025

City
WASHINGTONState
DCZip Code
20515-6005

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

12.45

Transaction ID : B42D3E10965CF48E8858

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

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

19.45

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

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LONGWORTH CAFETERIA

Mailing Address 15 INDEPENDENCE AVE SE

City
WASHINGTONState
DCZip Code
20515-6005Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

16.40

Transaction ID : BE5F90B9DAC2346DF83E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCDOWELL, ADDISON, , ,

Mailing Address PO BOX 80172

City
RALEIGHState
NCZip Code
27623-0172Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2661.12

Transaction ID : BE0FA57D2545B49CF9BF

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCDOWELL, ADDISON, , ,

Mailing Address PO BOX 80172

City
RALEIGHState
NCZip Code
27623-0172Purpose of Disbursement
SEE BELOW

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : BC20DA8B0786A44D4834

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

3427.52

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WHITE HOUSE NANNIES INC.Mailing Address 7315 WISCONSIN AVE
STE 780ECity
BETHESDAState
MDZip Code
20814-3286Purpose of Disbursement
CHILDCARE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B3A0377FC474C4E99B12

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. MCDOWELL, ADDISON, , ,

Mailing Address PO BOX 80172

City
RALEIGHState
NCZip Code
27623-0172Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1665.30

Transaction ID : B6AEE5E143C68441ABEB

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCDOWELL, ADDISON, , ,

Mailing Address PO BOX 80172

City
RALEIGHState
NCZip Code
27623-0172Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

897.82

Transaction ID : B634EA7001DF64F758F5

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

2563.12

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MCDOWELL, ADDISON, , ,

Mailing Address PO BOX 80172

City
RALEIGHState
NCZip Code
27623-0172Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

821.87

Transaction ID : B4046A0990C2F4819B91

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCDOWELL, ADDISON, , ,

Mailing Address PO BOX 80172

City
RALEIGHState
NCZip Code
27623-0172Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2077.04

Transaction ID : BF56503D6A2134774ABF

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MCDOWELL, ADDISON, , ,

Mailing Address PO BOX 80172

City
RALEIGHState
NCZip Code
27623-0172Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1402.38

Transaction ID : B19868D88E96240E186A

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

4301.29

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MCDOWELL, ADDISON, , ,

Mailing Address PO BOX 80172

City
RALEIGHState
NCZip Code
27623-0172Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2015.30

Transaction ID : B7FA45A3ECEBE4776AFD

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MCDOWELL, ADDISON, , ,

Mailing Address PO BOX 80172

City
RALEIGHState
NCZip Code
27623-0172Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1756.79

Transaction ID : B0808232C55F84F3C9C9

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NATIONALS PARK

Mailing Address 1500 S CAPITOL ST SE

City
WASHINGTONState
DCZip Code
20003-3599Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

247.50

Transaction ID : B15FA13561F624C878B5

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

4019.59

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OAK GROVE CAMPAIGNSMailing Address 2474 WALNUT STREET
#322City
CARYState
NCZip Code
27518-9212Purpose of Disbursement
MANAGEMENT CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BCE943E9A1DFD4309BD6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OAK GROVE CAMPAIGNSMailing Address 2474 WALNUT STREET
#322City
CARYState
NCZip Code
27518-9212Purpose of Disbursement
MANAGEMENT CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30000.00

Transaction ID : BC8EC4BD614F64DB99FD

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OCEAN PRIME

Mailing Address 1341 G ST NW

City
WASHINGTONState
DCZip Code
20005-3105Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

340.69

Transaction ID : BC093039C2E234467931

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

32840.69

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OCEANAIRE SEAFOOD ROOM

Mailing Address 1201 F ST NW

City
WASHINGTONState
DCZip Code
20004-1217Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1601.53

Transaction ID : B8C626302B4D0418E830

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PAIGE HOBBS

Mailing Address 770 MALLARD LANDING BLVD

City
CLEMMONSState
NCZip Code
27012-6969Purpose of Disbursement
CHILDCARE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1140.00

Transaction ID : B4501265F91654262861

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PAIGE HOBBS

Mailing Address 770 MALLARD LANDING BLVD

City
CLEMMONSState
NCZip Code
27012-6969Purpose of Disbursement
CHILDCARE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1302.00

Transaction ID : BC686F76F99E74EC3894

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

4043.53

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

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

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PAIGE HOBBS

Mailing Address 770 MALLARD LANDING BLVD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

City
CLEMMONSState
NCZip Code
27012-6969

FEC Identification Number

C

Purpose of Disbursement
CHILDCARE SERVICES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1533.00

Transaction ID : BA2BB33A3B9C14669AC6

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. RIGHT TIME COMPLIANCE

Mailing Address PO BOX 80172

Date of Disbursement

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

City
RALEIGHState
NCZip Code
27623-0172

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

616.25

Transaction ID : B9A4776A25EBA48BDB21

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. RIGHT TIME COMPLIANCE

Mailing Address PO BOX 80172

Date of Disbursement

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

City
RALEIGHState
NCZip Code
27623-0172

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

892.50

Transaction ID : B35FD96BC94A74C59A09

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

3041.75

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RUSSETMailing Address 201 N UNION ST
STE 110City
ALEXANDRIAState
VAZip Code
22314-2663Purpose of Disbursement
COMMUNICATIONS CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B1DEBC29F4D8241908C4

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SEA ISLAND COMPANY

Mailing Address 100 CLOISTER DR

City
SEA ISLANDState
GAZip Code
31561-9705Purpose of Disbursement
DEPOSIT FOR FUNDRAISING EVENT

003

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B52F8A7951AEA4ED3B78

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SEA ISLAND COMPANY

Mailing Address 100 CLOISTER DR

City
SEA ISLANDState
GAZip Code
31561-9705Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

158.64

Transaction ID : B857831D3DCF94E859F6

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

9158.64

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 134 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SEA ISLAND COMPANY

Mailing Address 100 CLOISTER DR

City
SEA ISLANDState
GAZip Code
31561-9705Purpose of Disbursement
LODGING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

291.04

Transaction ID : BA623086A8B774F52AA6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

City
BERMUDA RUNState
NCZip Code
27006Purpose of Disbursement
TRAVEL

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

45.26

Transaction ID : B48496E85D9D947108B2

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

City
BERMUDA RUNState
NCZip Code
27006Purpose of Disbursement
FOOD/BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6.81

Transaction ID : B34B0AD4FF7554913950

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

343.11

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 135 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

29.36

Transaction ID : BF9126F0DB74A438D892

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

47.84

Transaction ID : B14AE72906EBE4E69852

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

12.54

Transaction ID : B291C1D1696BA46A895E

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

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

89.74

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 136 OF 205

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

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

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

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

57.20

Transaction ID : B95874465DF1C4CF8867

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

8.40

Transaction ID : BEFB4D83ADC0B4D61A99

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

3.40

Transaction ID : B2C33920CDE724B0DA91

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

69.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 137 OF 205

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

9.79

Transaction ID : B6C758A96D0B84637982

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

69.66

Transaction ID : B0EC0A37F93FD423BBDD

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

5.96

Transaction ID : BB582DDBD54154590AFB

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

85.41

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 138 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

58.39

Transaction ID : B24231C7EFB6C4EBA91D

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

61.95

Transaction ID : B81B0C7B4DBA44BE9966

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

3.40

Transaction ID : BA93B76783D2046F09B0

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

123.74

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 139 OF 205

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

41.26

Transaction ID : B998529D8F81D49A38F0

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

17.05

Transaction ID : B7C24ACF3FA4142908DD

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

6.38

Transaction ID : B0169BDD5B61B414B9E9

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

64.69

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

CPurpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

32.60

Transaction ID : BBA75B4E52E404925A03

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

CPurpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

32.60

Transaction ID : B9E74D87E6B6E4CF1AC5

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

CPurpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

33.27

Transaction ID : B11EE18C832F14E07954

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

98.47

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

37.11

Transaction ID : BFA66901151244528B82

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

10.01

Transaction ID : BC025409E06164A4986C

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

39.96

Transaction ID : B5AA640D166A94E51AAC

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

87.08

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

6.81

Transaction ID : B7B6E4C50FEC94A6189B

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

51.12

Transaction ID : B4CDA603A4B3545E6B1E

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

6.81

Transaction ID : B9A67CF3A2BFE47AF94C

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

64.74

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 143 OF 205

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

50.26

Transaction ID : B964959421096495383E

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

27.78

Transaction ID : B8EEEEB6A76884C47B84

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

35.34

Transaction ID : B7C3F6CCFF42844078E9

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

113.38

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

3.40

Transaction ID : B1FB1C6D70EB2431D925

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

27.26

Transaction ID : B53C9B6D96A0140CF938

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

55.11

Transaction ID : BF07C6D708CD24A30BBB

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

85.77

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

32.60

Transaction ID : B15E43BEF9D074AFCACB

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

3.40

Transaction ID : B162FE94273BA45E29D5

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

3.40

Transaction ID : BA893A0302FD44A81BD8

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

39.40

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 146 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

65.12

Transaction ID : BBCC4403CFD3A4EAC83A

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

3.40

Transaction ID : BB1EE65F44F5B4FD997E

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

7.47

Transaction ID : B3588AE0E781A43AB80D

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

75.99

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 147 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

CPurpose of Disbursement
FOOD/BEVERAGE

001

Category/
Type

Amount of Each Disbursement this Period

3.40

Transaction ID : B2318A06CCC0C4DD38BF

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

CPurpose of Disbursement
TRAVEL

001

Category/
Type

Amount of Each Disbursement this Period

51.81

Transaction ID : B78C4C3CA94F847A696C

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

CPurpose of Disbursement
FOOD/BEVERAGE

001

Category/
Type

Amount of Each Disbursement this Period

3.40

Transaction ID : B9913732A07C4400CAFA

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

58.61

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 148 OF 205

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
TRAVEL

001

Amount of Each Disbursement this Period

39.96

Transaction ID : B1814304B57B04261B1B

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

10.33

Transaction ID : BBE2916EE3C7C4A78AF5

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. SHEETZ

Mailing Address 286 NC-801

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2025

City
BERMUDA RUNState
NCZip Code
27006

FEC Identification Number

C

Purpose of Disbursement
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

6.81

Transaction ID : B9F25652D4C0B4745943

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

57.10

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 149 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SIMPLISAFEMailing Address 294 WASHINGTON STREET
NINTH FLOORCity
BOSTONState
MAZip Code
02108Purpose of Disbursement
SECURITY

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

29.99

Transaction ID : BA0D7C623B9D2410C8C7

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SIMPLISAFEMailing Address 294 WASHINGTON STREET
NINTH FLOORCity
BOSTONState
MAZip Code
02108Purpose of Disbursement
SECURITY

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

29.99

Transaction ID : B08DD706710364A13A9A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SIMPLISAFEMailing Address 294 WASHINGTON STREET
NINTH FLOORCity
BOSTONState
MAZip Code
02108Purpose of Disbursement
SECURITY

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

29.99

Transaction ID : BD8B0F857377341A8989

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

89.97

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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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE INDIE GROUP NC, LLC

Mailing Address 303 MULBERRY STREET

City
RALEIGHState
NCZip Code
27604Purpose of Disbursement
COMMUNICATIONS CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BE5453D1C8CD348A392E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE INDIE GROUP NC, LLC

Mailing Address 303 MULBERRY STREET

City
RALEIGHState
NCZip Code
27604Purpose of Disbursement
COMMUNICATIONS CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BF710DFF1B0AA4B87B85

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE INDIE GROUP NC, LLC

Mailing Address 303 MULBERRY STREET

City
RALEIGHState
NCZip Code
27604Purpose of Disbursement
COMMUNICATIONS CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30000.00

Transaction ID : B132D1F03AAC64DA1AAB

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

32000.00

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE STANTON GROUP

Mailing Address 3410 ALABAMA AVE

City
ALEXANDRIAState
VAZip Code
22305-1736Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9000.00

Transaction ID : B725199CE8E204CC7BAF

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE STANTON GROUP

Mailing Address 3410 ALABAMA AVE

City
ALEXANDRIAState
VAZip Code
22305-1736Purpose of Disbursement
MEALS/POSTAGE/TRAVEL & SEE BELOW

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13382.52

Transaction ID : BD2103753E35E47FCA74

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BOBBY VAN'S STEAKHOUSE

Mailing Address 809 15TH ST NW

City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
FOOD FOR FUNDRAISING EVENT

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

386.10

Transaction ID : B18C3EE4878574D56B8B

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

22382.52

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 153 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OCEAN PRIME

Mailing Address 1341 G ST NW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

City
WASHINGTONState
DCZip Code
20005-3105

FEC Identification Number

CPurpose of Disbursement
BALANCE OWED FOR INAUGURATION DINNER

001

Amount of Each Disbursement this Period

2020.22

Transaction ID : BFE1288AE845F4089ABA

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. CORCORAN CATERERS

Mailing Address 2401 MONTGOMERY ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

City
SILVER SPRINGState
MDZip Code
20910-1250

FEC Identification Number

CPurpose of Disbursement
CATERING FOR INAUGURATION EVENT

003

Amount of Each Disbursement this Period

3431.48

Transaction ID : B1A6270FFEB8E4380838

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. THE CAPITAL GRILLE

Mailing Address 601 PENNSYLVANIA AVE NW

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

City
WASHINGTONState
DCZip Code
20004-2601

FEC Identification Number

CPurpose of Disbursement
FOOD/BEVERAGE

003

Amount of Each Disbursement this Period

633.94

Transaction ID : B6B62CAD9AB34467D880

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 154 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JOE'S SEAFOOD

Mailing Address 750 15TH ST NW

City
WASHINGTONState
DCZip Code
20005-1018Purpose of Disbursement
DINNER FOR INAUGURATION EVENT

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5204.97

Transaction ID : B08412B230A3B4306BA0

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. TOSCA

Mailing Address 1112 F ST NW

City
WASHINGTONState
DCZip Code
20004-1308Purpose of Disbursement
LUNCH FOR FUNDRAISING EVENT

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

860.10

Transaction ID : BB6AE03418E6C4CB5AA5

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21.97

Transaction ID : B41621B338DA2482DB87

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SCHNEIDER'S OF CAPITOL HILL

Mailing Address 300 MASSACHUSETTS AVE NE

City
WASHINGTONState
DCZip Code
20002-5702Purpose of Disbursement
BEVERAGES FOR INAUGURATION EVENT

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

445.30

Transaction ID : B17A73E1E5D88436EBDE

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

24.83

Transaction ID : B8E05C7D5AB7B484DA66

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

24.57

Transaction ID : BA8F51DAEE5DF4091A77

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

49.40

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

77.72

Transaction ID : BB2875A6CF0B94DD5959

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

45.97

Transaction ID : B0BBBD7C6F84DC4EC2AA1

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

53.75

Transaction ID : BDBB4F8942B5745E9978

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

177.44

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

28.01

Transaction ID : B7FA16A92198549E3A4A

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

31.52

Transaction ID : B9537D8A9B66B44719E2

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32.10

Transaction ID : BABDB74010E794E7189C

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

91.63

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 158 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

102.57

Transaction ID : B8C7C009E7D4C401A996

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

26.05

Transaction ID : BDEFF03641A904AAD84D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

33.89

Transaction ID : BA8E436306E884640982

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

162.51

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

77.06

Transaction ID : B9559B351A0604043B70

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

54.04

Transaction ID : B67954ABFFA9048BCB6B

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

36.16

Transaction ID : BD3C8D6571D5F451D908

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

167.26

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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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

69.75

Transaction ID : BC00497707A4B44F18B8

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

36.09

Transaction ID : B05FF0C2B6F75452EBA0

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

30.90

Transaction ID : B69EB6A16E19444A8910

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

136.74

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

28.70

Transaction ID : B50D6442E84E845D788F

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32.15

Transaction ID : B9D9B2571B96B4109920

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

31.09

Transaction ID : B3C04C2F54AD840A5B4E

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

91.94

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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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

25.00

Transaction ID : B7535EBBB1EE2410F8F9

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		18		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

22.14

Transaction ID : BB7644424916F4248BB6

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		18		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

24.13

Transaction ID : B5B6D8BBB8C1F40C7B38

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

71.27

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 163 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

48.59

Transaction ID : B0E6CA55B30FE4E68859

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

31.55

Transaction ID : BA617EE0A66054B31947

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

31.55

Transaction ID : B615F2F5829834B8F8D3

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

111.69

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 164 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

49.17

Transaction ID : B37EE1ACEF7A04F07840

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32.38

Transaction ID : BA6A5334A16434AA39AF

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

27.36

Transaction ID : B073D07D336B14AF9821

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

108.91

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 165 OF 205

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

35.73

Transaction ID : BF0A0DDFCE9A34239976

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

23.89

Transaction ID : BDF137403372340E3B2B

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

28.61

Transaction ID : BDC9C07BD20A84A96A00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

88.23

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 166 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : B906C1BCCEDB546E9B14

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

33.37

Transaction ID : B763BD2EBBE634D67A05

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30.18

Transaction ID : B21418C688CEF438C823

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

93.55

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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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

94.96

Transaction ID : B39ACFE1DA19A479C973

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32.85

Transaction ID : B1D4FA972324E40F8A0D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

23.55

Transaction ID : BE381543D6A3F436A98A

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

151.36

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

14.19

Transaction ID : B5AC42BA53B0D44A8BD6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

56.75

Transaction ID : B001DE55BDC2A43E485A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

57.57

Transaction ID : B0B521F6204DB4003892

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

128.51

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

36.40

Transaction ID : B9E95A3B9B7D947A4963

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

35.81

Transaction ID : BF1EBA2DBA538475AA58

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

001

Amount of Each Disbursement this Period

52.06

Transaction ID : B1F552224729F495694A

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

124.27

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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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

43.13

Transaction ID : B1E0AA9355D65451E822

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

118.29

Transaction ID : BCFE4A5C329AC428789A

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

City
SAN FRANCISCOState
CAZip Code
94158

FEC Identification Number

CPurpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

36.67

Transaction ID : B89DD6C0FBED74FE981B

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

198.09

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 171 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

34.86

Transaction ID : B1D219FC3E3924690B72

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1725 3RD STREET

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
TRANSPORTATION

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

33.04

Transaction ID : BB93B441DA8C84092AC2

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. US HOUSE OF REPRESENTATIVES GIFT SHOP

Mailing Address 15 INDEPENDENCE AVE SE

City
WASHINGTONState
DCZip Code
20515-6005Purpose of Disbursement
CONSTITUENT GIFTS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

101.70

Transaction ID : B3E8FDB125FC746F9903

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

169.60

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 172 OF 205

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. VERIZON

Mailing Address 1 VERIZON WAY

City
BASKING RIDGEState
NJZip Code
07920Purpose of Disbursement
PHONE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

476.85

Transaction ID : B1C776ACF155F46BE8BD

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VERIZON

Mailing Address 1 VERIZON WAY

City
BASKING RIDGEState
NJZip Code
07920Purpose of Disbursement
PHONE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

412.43

Transaction ID : B22328E0AB1B5408493C

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VERIZON

Mailing Address 1 VERIZON WAY

City
BASKING RIDGEState
NJZip Code
07920Purpose of Disbursement
PHONE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

345.43

Transaction ID : B7D2DAF18AA8B4279B43

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1234.71

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 173 OF 205

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. VERIZON

Mailing Address 1 VERIZON WAY

City
BASKING RIDGEState
NJZip Code
07920Purpose of Disbursement
PHONE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

413.52

Transaction ID : BECE521117EA049729A3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VERIZON

Mailing Address 1 VERIZON WAY

City
BASKING RIDGEState
NJZip Code
07920Purpose of Disbursement
PHONE SERVICES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

526.86

Transaction ID : B4AD657D70C45412D993

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.70

Transaction ID : B4EEE28540E5C4185944

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

960.08

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 174 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

61.56

Transaction ID : BA0EE7F6C6C5A42858E6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.02

Transaction ID : BA0EE714AB71548BEB76

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.20

Transaction ID : B387F9192BFC247DBB1F

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

141.78

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 175 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

219.52

Transaction ID : BFB10DB13B3E24F68A00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30.36

Transaction ID : BB85A383566C84473BF7

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.07

Transaction ID : B5241226499D6480B87D

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

249.95

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

275.95

Transaction ID : B32B49826AE494EBE9F9

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.22

Transaction ID : BBCACD5CDA3D241D6906

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.69

Transaction ID : B51B3F06653D746FA851

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

276.86

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.98

Transaction ID : B939FE0AD0F4E4258B26

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.10

Transaction ID : B0C946D110102407CB49

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.96

Transaction ID : B1296BA0C505543A5BFA

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11.04

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:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.23

Transaction ID : B4DC009AA051A479D981

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.21

Transaction ID : B7684A340CC2A405DB71

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.16

Transaction ID : BE6A570EBC99E4E5EA38

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.60

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 179 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.10

Transaction ID : BB2CA51C5FC7942A5BFA

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.20

Transaction ID : BD4151AAC1DD04072A86

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

41.24

Transaction ID : B741D47F3A441436BB95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

41.54

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:
(check only one)

PAGE 180 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.16

Transaction ID : B5A3333C1BA654A3E886

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.26

Transaction ID : B086AB5933B7543EEA1D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.26

Transaction ID : B527B79DC7FD04A9B831

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.68

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.11

Transaction ID : BAEC61FD3EA684027902

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.21

Transaction ID : B029E338E8CE1477F83E

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.05

Transaction ID : B52BAABEA686E4455B4E

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.37

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.17

Transaction ID : B3F932653488048F1963

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.22

Transaction ID : B73749F32BB CD416D990

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.88

Transaction ID : B69A24BF3226941B6AC2

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1.27

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.17

Transaction ID : B807D9B2D110244CC9F3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.19

Transaction ID : BE5876B8D3FE54FB284E

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.11

Transaction ID : B9DBAE13B3F89464FA6E

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.47

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.12

Transaction ID : B1DE392D1A3CB4B26BD0

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.05

Transaction ID : B6288F48626AF49E8A2A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.11

Transaction ID : BECD51999CD5F4A5D811

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.28

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.13

Transaction ID : BA4F0B755604246CCBEC

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.16

Transaction ID : BA628EDE4B45C4974B7D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.07

Transaction ID : B096D6AB348B64632BD1

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.36

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.23

Transaction ID : B3D593D94760440A9A78

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

271.64

Transaction ID : B7B04F261690843388FD

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

11.50

Transaction ID : B29F7A2598A204CEE8C8

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

283.37

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 187 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

41.89

Transaction ID : B06E4330621FB4FA68D6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.28

Transaction ID : BD72F3B5586DB4152B6D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

59.62

Transaction ID : BAEE0151C88E2439192D

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

101.79

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 188 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.17

Transaction ID : BDD5CA2B4D3674140B6D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.27

Transaction ID : BCEF23225F92047F591F

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.27

Transaction ID : B674E4165FD324465B18

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.71

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 189 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.31

Transaction ID : B772CB142B3304EB0A4B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.41

Transaction ID : BBEA18469A7194640B29

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.12

Transaction ID : B1CEB8AAA3BBA40D3AD1

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

310.84

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 190 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.08

Transaction ID : B6929FFEDD1E743D98B2

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.55

Transaction ID : BC94B7A54FBE44E75B5B

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.51

Transaction ID : BF00DFEFE4F4F41ECA1E

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11.14

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 191 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.11

Transaction ID : B4E403D6468704895BEC

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

287.39

Transaction ID : B0125E3B70A794558ABE

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.19

Transaction ID : B3D46492D0DC24120966

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

287.69

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

275.92

Transaction ID : BBF915894230A402988E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.34

Transaction ID : BBF71321710C1415B895

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.03

Transaction ID : B31BC13295F414897AB6

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

286.29

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.95

Transaction ID : B27536F24B2D84D29972

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.18

Transaction ID : B1FC6E0B81C1D42D69D0

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.15

Transaction ID : BC2F44A5FDF4B46278EE

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1.28

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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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.29

Transaction ID : BA3880A696C434BB9A3D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.08

Transaction ID : B4EE490DF2BB34E3CA8D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.24

Transaction ID : B29A5358050E545A8919

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

22.61

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.24

Transaction ID : B7BBE141B40AC4A9AA4B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.16

Transaction ID : BB004521E22874A38B20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

39.62

Transaction ID : BFB2DAF2523D14BE99FC

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

40.02

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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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

551.92

Transaction ID : BB6D048AE96BB48A8A70

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.85

Transaction ID : BD55ADED5EE4DCBBEB

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.19

Transaction ID : B8EBE57A041874DA69FD

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

552.96

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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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

102.72

Transaction ID : B264C3B4BBECE4D8CA0D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.28

Transaction ID : B3A938076EFDD4BCA98B

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.18

Transaction ID : B17ABCAF05929456BAEB

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

103.18

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 198 OF 205

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

439.21

Transaction ID : B5ED60D6C97254AC3831

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

137.98

Transaction ID : BEF2C3F7CEF50434BBA0

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

59.23

Transaction ID : BF229BB04C1614ABBB55

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

636.42

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 199 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

60.47

Transaction ID : B4376FCE0F6114AFE80C

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.07

Transaction ID : BCA9F98DF5A2D4421B0D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

98.92

Transaction ID : B56ADC9EF13214C15A15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

159.46

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)

PAGE 200 OF 205

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

341.06

Transaction ID : BEF3DE5630FBB4382949

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLCMailing Address 1776 WILSON BLVD
SUITE 530City
ARLINGTONState
VAZip Code
22209-2517Purpose of Disbursement
MERCHANT FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1857.09

Transaction ID : B248B5A4767F2476EB8F

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2198.15

TOTAL This Period (last page this line number only).....▶

155398.18

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 201 OF 205

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BURLESON, JOE, , ,

Mailing Address 248 MARKET STREET

City
LOCUSTState
NCZip Code
28097-9437Purpose of Disbursement
REFUND: PARTIAL REFUND OF 5/19/25 CONTRIBUTION

010

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

143.56

Transaction ID : BAF73DE8BCB3E43A18EF

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DUNAWAY, ROBERT, , ,

Mailing Address 905 HEMINGWAY DR.

City
RALEIGHState
NCZip Code
27609Purpose of Disbursement
REFUND: REFUND OF 6/12/25 CONTRIBUTION

010

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : BA66EF34066D14D7A904

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOHNSON, BRIAN, , ,

Mailing Address 528 N COLUMBUS STREET

City
ALEXANDRIAState
VAZip Code
22314-2216Purpose of Disbursement
REFUND: VOID CK#1033 DATED 10/23/24

010

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

- 3300.00

Transaction ID : B44756E109C7841719E4

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

- 2906.44

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 202 OF 205

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STARNES, BRYAN, , ,

Mailing Address 4486 WIKE ROAD

City
GRANITE FALLSState
NCZip Code
28630Purpose of Disbursement
REFUND: PARTIAL REFUND OF 6/3/25 CONTRIBUTION

010

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

143.56

Transaction ID : BF28082A0DCCE4EA1B2B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMAS, PHILIP, R, ,

Mailing Address 309 W PARK DR

City
RALEIGHState
NCZip Code
27605-1741Purpose of Disbursement
REFUND: RET'D CK 4/14/25 CONTRIBUTION

010

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : BB6E98899B2084DD89A0

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TREFZGER, CHARLIE, , ,

Mailing Address 29 37TH AVE NW

City
HICKORYState
NCZip Code
28630Purpose of Disbursement
REFUND: PARTIAL REFUND OF 6/3/25 CONTRIBUTION

010

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

143.56

Transaction ID : B29DFA6800BED41CA919

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

537.12

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 203 OF 205

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WARD, ROBERT, E, ,

Mailing Address 7004 LONE OAK PL

City
RALEIGH

State
NC

Zip Code
27615-5453

Purpose of Disbursement
REFUND: RET'D CK 4/14/25 CONTRIBUTION

010

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
04 / 21 / 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B7618D98046CA46778D1

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶

- 2119.32

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 204 OF 205

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

ARISTOTLE

Nature of Debt (Purpose):

SOFTWARE

Mailing Address 205 PENNSYLVANIA AVE, SE

City

WASHINGTON

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

2100.00

Transaction ID : D0A62D8F993BE46D78E2

Amount Incurred This Period

0.00

Payment This Period

2100.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

OAK GROVE CAMPAIGNS

Nature of Debt (Purpose):

MANAGEMENT CONSULTING

Mailing Address 2474 WALNUT STREET
#322

City

CARY

State

NC

Zip Code

27518-9212

Outstanding Balance Beginning This Period

30000.00

Transaction ID : DBDAFA535E5294A5E956

Amount Incurred This Period

0.00

Payment This Period

30000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THE INDIE GROUP NC, LLC

Nature of Debt (Purpose):

COMMUNICATIONS CONSULTING

Mailing Address 303 MULBERRY STREET

City

RALEIGH

State

NC

Zip Code

27604

Outstanding Balance Beginning This Period

30000.00

Transaction ID : DDE9F92062B0A481BA00

Amount Incurred This Period

0.00

Payment This Period

30000.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

0.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 205 OF 205

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

MCDOWELL FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THE STANTON GROUP

Nature of Debt (Purpose):

MEALS/POSTAGE/TRAVEL

Mailing Address 3410 ALABAMA AVE

City

ALEXANDRIA

State

VA

Zip Code

22305-1736

Outstanding Balance Beginning This Period

13382.52

Transaction ID : D218D237B05684BC0874

Amount Incurred This Period

0.00

Payment This Period

13382.52

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

0.00

2) **TOTALS** This Period (last page this line number only)

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)