

**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

CITIZENS FOR AMANDA PUSCZEK

ADDRESS (number and street)

P.O. BOX 1014

Check if different
than previously
reported. (ACC)

CULLMAN

AL

35056

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00902247

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

AL

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2026

through

M M / D D / Y Y Y Y

03 / 31 / 2026

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

Type or Print Name of Treasurer

Barnes, Trever, , ,

Signature of Treasurer

Barnes, Trever, , ,

Date

M M / D D / Y Y Y Y

03 / 31 / 2026

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

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

CITIZENS FOR AMANDA PUSCZEK

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	6448.00	6448.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6448.00	6448.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	8314.74	8314.74
(b) Total Offsets to Operating Expenditures (from Line 14)	70.67	70.67
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	8244.07	8244.07
8. Cash on Hand at Close of Reporting Period (from Line 27)	114.83	
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)	6000.00	

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

CITIZENS FOR AMANDA PUSCZEK

Report Covering the Period:

From:

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

To:

M M / D D / Y Y Y Y
03 31 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

4200.00

4200.00

(ii) Unitemized

2248.00

2248.00

(iii) TOTAL of contributions
from individuals ▶

6448.00

6448.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

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

6448.00

6448.00

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.)

70.67

70.67

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

0.00

0.00

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

6518.67

6518.67

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.....

8314.74

8314.74

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans

0.00

0.00

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

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

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

0.00

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

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

8314.74

8314.74

III. CASH SUMMARY

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

1910.90

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

6518.67

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

8429.57

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

8314.74

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

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

114.83

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

PAGE 5 OF 9

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

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NAME OF COMMITTEE (In Full)

CITIZENS FOR AMANDA PUSCZEK

Full Name (Last, First, Middle Initial)

Elrod, Joe, , ,

A.

Mailing Address 16932 county road 89

City

Mentone

State

AL

Zip Code

35984

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

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	2		2	4		2	0	2	6

Transaction ID : SA11AI.4143

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

Manifest Virtual Solutions

B.

Mailing Address 910 Crestline Rd NW

City

Huntsville

State

AL

Zip Code

35816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

Date of Receipt

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

Transaction ID : SA11AI.4247

Amount of Each Receipt this Period

3200.00



Memo Item

In-kind - Campaign consulting services for campaign operations and strategy

Full Name (Last, First, Middle Initial)

Marsden, Jennifer, , ,

C.

Mailing Address 1001 Lilly Flagg Cir SE

City

Huntsville

State

AL

Zip Code

35803

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

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	1		2	8		2	0	2	6

Transaction ID : SA11AI.4179

Amount of Each Receipt this Period

500.00



Memo Item

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

3950.00

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 6 OF 9

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

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NAME OF COMMITTEE (In Full)

CITIZENS FOR AMANDA PUSCZEK

Full Name (Last, First, Middle Initial)

Siemer, Calvin, , ,

A. Mailing Address 2518 Birch Hollow Street

City
Henderson

State
NV

Zip Code
89044

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Venetian Resort

Occupation
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 Y
02 23 2026

Transaction ID : SA11AI.4141

Amount of Each Receipt this Period

250.00

☐ 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 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 Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

250.00

4200.00

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

PAGE 7 OF 9

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

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NAME OF COMMITTEE (In Full)

CITIZENS FOR AMANDA PUSCZEK

Full Name (Last, First, Middle Initial)

A. Alabama Democratic Party

Mailing Address 501 Adams Ave

Date of Disbursement

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

City
MontgomeryState
ALZip Code
36104

FEC Identification Number

C	C00902247
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Purpose of Disbursement
Candidate qualifying fee (State party)Candidate Name
CITIZENS FOR AMANDA PUSCZEKCategory/
Type

Amount of Each Disbursement this Period

3480.00

Transaction ID : SB17.4188

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 04

Full Name (Last, First, Middle Initial)

B. Manifest Virtual Solutions

Mailing Address 910 Crestline Rd NW

Date of Disbursement

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

City
HuntsvilleState
ALZip Code
35816

FEC Identification Number

C	
---	--

Purpose of Disbursement
In-kind - Campaign consulting services for campaign operations and strategy

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3200.00

Transaction ID : SB17.4249

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Publix

Mailing Address 3300 Publix Corporate Parkway

Date of Disbursement

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

City
LakelandState
FLZip Code
33811

FEC Identification Number

C	C00902247
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Purpose of Disbursement
Campaign launch: food and beveragesCandidate Name
CITIZENS FOR AMANDA PUSCZEKCategory/
Type

Amount of Each Disbursement this Period

368.73

Transaction ID : SB17.4219

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 04

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

7048.73

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 8 OF 9

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

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NAME OF COMMITTEE (In Full)

CITIZENS FOR AMANDA PUSCZEK

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 500 Staples Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
FraminghamState
MAZip Code
01702

FEC Identification Number

C C00902247

Purpose of Disbursement
Pushcard reprint (Regular mail)Candidate Name
CITIZENS FOR AMANDA PUSCZEKCategory/
Type

Amount of Each Disbursement this Period

179.84

Transaction ID : SB17.4234

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: AL

District: 04

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 500 Staples Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
FraminghamState
MAZip Code
01702

FEC Identification Number

C C00902247

Purpose of Disbursement
Pushcard reprint (Expedited mail)Candidate Name
CITIZENS FOR AMANDA PUSCZEKCategory/
Type

Amount of Each Disbursement this Period

199.83

Transaction ID : SB17.4235

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: AL

District: 04

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

379.67

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

7428.40

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 9

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

CITIZENS FOR AMANDA PUSCZEK

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

PUSCZEK, AMANDA NOELLE, , ,

Nature of Debt (Purpose):

Candidate paid amount to Sole Strategies

Mailing Address 427 NATURES WAY SOUTHWEST

City

HUNTSVILLE

State

AL

Zip Code

35824

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4239

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sole Strategies

Nature of Debt (Purpose):

Fundraising consulting

Mailing Address 1930 18th St NW
Suite B2 #1036

City

Washington

State

DC

Zip Code

20009

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4237

Amount Incurred This Period

3000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3000.00

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)

6000.00

2) **TOTALS** This Period (last page this line number only)

6000.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

6000.00