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

CHRIS STIGALL FOR CONGRESS

ADDRESS (number and street) ▼

7509 NW TIFFANY SPRINGS PKWY.

STE. 300

☐ Check if different than previously reported. (ACC)

KANSAS CITY | MO | 64153 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00945832

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

STATE ▼ DISTRICT: MO 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 MM 08 / DD 04 / YYYY 2026 in the State of MO

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

- ☐ General (30G)
- ☐ Runoff (30R)
- ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period MM 07 / DD 01 / YYYY 2026 through MM 07 / DD 15 / YYYY 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: Thomas III, James, , ,

Signature of Treasurer: *Thomas III, James, , ,* Date: MM 07 / DD 23 / YYYY 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							

Image# 202607239894422199

SUMMARY PAGE
of Receipts and Disbursements

FEC **Form 3** (Revised 03/2016)

Write or Type Committee Name

CHRIS STIGALL FOR CONGRESS

Report Covering the Period: From: 07/01/2026 To: 07/15/2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	53240.00	599336.00
(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))	53240.00	599336.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	156991.76	433286.10
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	156991.76	433286.10
8. Cash on Hand at Close of Reporting Period (from Line 27).....	166049.90	
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)	63950.45	

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

Image# 202607239894422200

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 05/2016)

Write or Type Committee Name

CHRIS STIGALL FOR CONGRESS

Report Covering the Period: From: 07/01/2026 To: 07/15/2026

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)	23450.00	504636.90
(ii) Unitemized	1290.00	18699.10
(iii) TOTAL of contributions from individuals ▶	24740.00	523336.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	28500.00	76000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	53240.00	599336.00
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.)	0.00	0.00
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) ▶	53240.00	599336.00

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	156991.76	433286.10
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) ▶	156991.76	433286.10

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	269801.66
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	53240.00
25. SUBTOTAL (add Line 23 and Line 24)	323041.66
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	156991.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	166049.90

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Alldredge, Robert, , ,
Mailing Address PO Box 45
City: Fairfax | State: MO | Zip Code: 64446
FEC ID number of contributing federal political committee: C
Name of Employer: Fairfax Agency Inc
Occupation: Owner/Agent
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 13 / 2026
Transaction ID : SA11AI.5452
Amount of Each Receipt this Period: 500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Chapman, Heath, , ,
Mailing Address 22012 NE 172nd Street
City: Kearney | State: MO | Zip Code: 64060
FEC ID number of contributing federal political committee: C
Name of Employer: HM Core Consulting
Occupation: Exec
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 14 / 2026
Transaction ID : SA11AI.5581
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Davis, Jeffrey, , ,
Mailing Address 5818 Pebble Creek Drive
City: Wardsville | State: MO | Zip Code: 65101
FEC ID number of contributing federal political committee: C
Name of Employer: NorthPoint Development
Occupation: VP - Strategic Initiatives
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 06 / 2026
Transaction ID : SA11AI.5437
Amount of Each Receipt this Period: 500.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial): Garrett, Nathan, , ,
Mailing Address 3705 E Ridgely Road
City: Edgerton | State: MO | Zip Code: 64444
FEC ID number of contributing federal political committee: C
Name of Employer: Graves Garrett
Occupation: Attorney
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11AI.5480
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Goodnight, Stephanie, , ,
Mailing Address 7820 Highway E
City: Edgerton | State: MO | Zip Code: 64444
FEC ID number of contributing federal political committee: C
Name of Employer: Herzog Foundation
Occupation: Communications
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11AI.5488
Amount of Each Receipt this Period: 500.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Grant, Matthew, , ,
Mailing Address 606 Blackhawke Drive
City: Smithville | State: MO | Zip Code: 64089
FEC ID number of contributing federal political committee: C
Name of Employer: Atha Bros
Occupation: Ag Sales
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3500.00

Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11AI.5587
Amount of Each Receipt this Period: 3500.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 5000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Graves, Tracy, , ,
Mailing Address 8460 Highway E
City: Edgerton | State: MO | Zip Code: 64442
FEC ID number of contributing federal political committee: C
Name of Employer: Homemaker
Occupation: Homemaker
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3500.00

Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11AI.5492
Amount of Each Receipt this Period: 3500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Greim, William, , ,
Mailing Address 1902 W Jesse James Road
City: Excelsior Springs | State: MO | Zip Code: 64024
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Lawyer
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11AI.5585
Amount of Each Receipt this Period: 500.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Grimwood, William, , ,
Mailing Address 3307 Westwood Drive
City: Saint Joseph | State: MO | Zip Code: 64505
FEC ID number of contributing federal political committee: C
Name of Employer: Hillyard
Occupation: CIO
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 01 / 2026
Transaction ID : SA11AI.5429
Amount of Each Receipt this Period: 500.00
☐ 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 RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Kruse, Nancy, , ,
Mailing Address 3150 Martin Road
City: Smithville | State: MO | Zip Code: 64089
FEC ID number of contributing federal political committee: C
Name of Employer: Homemaker | Occupation: Homemaker
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11AI.5494
Amount of Each Receipt this Period: 500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Langston-Justus, Jennifer, , ,
Mailing Address 13317 Mount Olivet Road
City: Smithville | State: MO | Zip Code: 64089
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed | Occupation: Realtor
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11AI.5476
Amount of Each Receipt this Period: 250.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Northcutt, Julie, , ,
Mailing Address 650 W Grace Street Unit 2
City: Chicago | State: IL | Zip Code: 60613
FEC ID number of contributing federal political committee: C
Name of Employer: Caregiverlist, Inc. | Occupation: Healthcare
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 01 / 2026
Transaction ID : SA11AI.5431
Amount of Each Receipt this Period: 300.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1050.00

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Pruitt, Johanna, , ,
Mailing Address 3835 Faraon
City: St Joseph | State: MO | Zip Code: 64506
FEC ID number of contributing federal political committee: C
Name of Employer: Agent Jo & Associates
Occupation: Real Estate Broker
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 400.00

Date of Receipt: 07 / 13 / 2026
Transaction ID : SA11AI.5591
Amount of Each Receipt this Period: 400.00
☐ Memo Item
In-kind - Meet and Greet Food and Drinks

B.
Full Name (Last, First, Middle Initial)
Purcell, Alfred, , ,
Mailing Address 9803 SE State Route T
City: Easton | State: MO | Zip Code: 64443
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: 1000.00

Date of Receipt: 07 / 13 / 2026
Transaction ID : SA11AI.5450
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Putt, Kevin, , ,
Mailing Address 69 Woodland Drive
City: Honey Brook | State: PA | Zip Code: 19344
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: 500.00

Date of Receipt: 07 / 07 / 2026
Transaction ID : SA11AI.5439
Amount of Each Receipt this Period: 500.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1900.00

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

Image# 202607239894422207

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Spennato, Deborah, , ,
Mailing Address 110 Tanglewood Lane
City: Newtown Square | State: PA | Zip Code: 19073
FEC ID number of contributing federal political committee: C
Name of Employer: Evalia Design, LLC
Occupation: Self Employed
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3500.00

Date of Receipt: 07 / 10 / 2026
Transaction ID : SA11AI.5458
Amount of Each Receipt this Period: 3500.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Spennato, Robert, , ,
Mailing Address 110 Tanglewood Lane
City: Newtown Square | State: PA | Zip Code: 19073
FEC ID number of contributing federal political committee: C
Name of Employer: Williamsburg Dental
Occupation: Dentist
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3500.00

Date of Receipt: 07 / 10 / 2026
Transaction ID : SA11AI.5456
Amount of Each Receipt this Period: 3500.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Talley, Trey, , ,
Mailing Address 1000 SE Wexford Road
City: Lathrop | State: MO | Zip Code: 64465
FEC ID number of contributing federal political committee: C
Name of Employer: Show Me Real Estate
Occupation: Agent
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11AI.5484
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 8000.00

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial): Talley, William, , ,
Mailing Address: 113 S Prairie Rose Street
City: Smithville | State: MO | Zip Code: 64089
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed | Occupation: Farmer
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00
Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11AI.5486
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 23450.00

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Alaskans For Nick Begich
Mailing Address PO Box 671710
City: Chugiak | State: AK | Zip Code: 99567
FEC ID number of contributing federal political committee: C C00792341
Name of Employer | Occupation
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 06 / 2026
Transaction ID : SA11C.5433
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
American Society of Anesthesiologist PAC (ASA PAC)
Mailing Address 1061 American Lane
City: Schaumburg | State: IL | Zip Code: 60173
FEC ID number of contributing federal political committee: C C00255752
Name of Employer | Occupation
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 5000.00

Date of Receipt: 07 / 15 / 2026
Transaction ID : SA11C.5498
Amount of Each Receipt this Period: 5000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Buckeye Liberty PAC
Mailing Address 502 6th Street
City: Hudson | State: WI | Zip Code: 54016
FEC ID number of contributing federal political committee: C C00366781
Name of Employer | Occupation
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 5000.00

Date of Receipt: 07 / 10 / 2026
Transaction ID : SA11C.5463
Amount of Each Receipt this Period: 5000.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 11000.00

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

Image# 202607239894422210

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Jim Jordan for Congress
Mailing Address 502 6th Street
City: Hudson | State: WI | Zip Code: 54016
FEC ID number of contributing federal political committee: C C00416594
Name of Employer | Occupation
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify) ▼
Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 07 / 10 / 2026
Transaction ID : SA11C.5465
Amount of Each Receipt this Period: 2000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Jobs, Freedom and Security PAC
Mailing Address P.O. Box 25376
City: Houston | State: TX | Zip Code: 77265
FEC ID number of contributing federal political committee: C C00536540
Name of Employer | Occupation
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify) ▼
Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 07 / 10 / 2026
Transaction ID : SA11C.5460
Amount of Each Receipt this Period: 5000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Jobs, Freedom and Security PAC
Mailing Address P.O. Box 25376
City: Houston | State: TX | Zip Code: 77265
FEC ID number of contributing federal political committee: C C00536540
Name of Employer | Occupation
Receipt For: 2026
☐ Primary ☒ General ☐ Other (specify) ▼
Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 07 / 10 / 2026
Transaction ID : SA11C.5461
Amount of Each Receipt this Period: 5000.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 12000.00

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
Meba PAF
Mailing Address 444 N. Capitol Street NW
Ste. 800
City: Washington | State: DC | Zip Code: 20001
FEC ID number of contributing federal political committee: C C00279380
Name of Employer:
Occupation:
Receipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 15 / Y Y Y Y 2026
Transaction ID : SA11C.5467
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
NSSGA ROCKPAC
Mailing Address 66 Canal Center Plaza
Suite 300
City: Alexandria | State: VA | Zip Code: 22314
FEC ID number of contributing federal political committee: C C00089458
Name of Employer:
Occupation:
Receipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 15 / Y Y Y Y 2026
Transaction ID : SA11C.5471
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Raptor PAC
Mailing Address PO Box 4864
City: Midland | State: TX | Zip Code: 79704
FEC ID number of contributing federal political committee: C C00749481
Name of Employer:
Occupation:
Receipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼ 2500.00

Date of Receipt: M M 07 / D D 07 / Y Y Y Y 2026
Transaction ID : SA11C.5435
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 RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
YOPAC
Mailing Address P.O. Box 51
City: Alexandria | State: VA | Zip Code: 22313
FEC ID number of contributing federal political committee: C C00497305
Name of Employer | Occupation
Receipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00

Date of Receipt: M M 07 / D D 15 / Y Y Y Y 2026
Transaction ID : SA11C.5469
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 28500.00

Image# 202607239894422213

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Anedot

Mailing Address 1340 Poydras Street #1770
City: New Orleans | State: LA | Zip Code: 70112

Purpose of Disbursement: Transaction Fees
Candidate Name
Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 03 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 34.90

Transaction ID : SB17.5508

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Anedot

Mailing Address 1340 Poydras Street #1770
City: New Orleans | State: LA | Zip Code: 70112

Purpose of Disbursement: Transaction Fees
Candidate Name
Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 09 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 40.60

Transaction ID : SB17.5514

☐ Memo Item

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

Mailing Address 1340 Poydras Street #1770
City: New Orleans | State: LA | Zip Code: 70112

Purpose of Disbursement: Transaction Fees
Candidate Name
Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 13 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 2.00

Transaction ID : SB17.5518

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 77.50

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

Image# 202607239894422214

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Anedot

Mailing Address 1340 Poydras Street #1770
City: New Orleans | State: LA | Zip Code: 70112

Purpose of Disbursement: Transaction Fees
Candidate Name
Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 15 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 9.90

Transaction ID : SB17.5519

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Anedot

Mailing Address 1340 Poydras Street #1770
City: New Orleans | State: LA | Zip Code: 70112

Purpose of Disbursement: Transaction Fees
Candidate Name
Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 15 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 60.60

Transaction ID : SB17.5520

☐ Memo Item

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

Mailing Address 1340 Poydras Street #1770
City: New Orleans | State: LA | Zip Code: 70112

Purpose of Disbursement: Transaction Fees
Candidate Name
Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 15 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 207.50

Transaction ID : SB17.5594

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 278.00

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

Image# 202607239894422215

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
A Plus Payroll

Mailing Address 1518 E Bradford Pkwy.

City: Springfield | State: MO | Zip Code: 65804

Purpose of Disbursement: Payroll Taxes

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 01 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 925.70

Transaction ID : SB17.5501

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
A Plus Payroll

Mailing Address 1518 E Bradford Pkwy.

City: Springfield | State: MO | Zip Code: 65804

Purpose of Disbursement: Payroll Service Fees

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 01 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 60.20

Transaction ID : SB17.5502

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Brown, David, , ,

Mailing Address 301 TINGEY ST SE

City: WASHINGTON | State: DC | Zip Code: 20003

Purpose of Disbursement: Payroll

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 01 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 6500.00

Transaction ID : SB17.5500

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 7485.90

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

Image# 202607239894422216

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Commerce Bank

Mailing Address 1001 Main Street
BB-1

City: Kansas City | State: MO | Zip Code: 64105

Purpose of Disbursement: Wire Transfer Fee

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 01 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 45.00

Transaction ID : SB17.5504

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Commerce Bank

Mailing Address 1001 Main Street
BB-1

City: Kansas City | State: MO | Zip Code: 64105

Purpose of Disbursement: Wire Transfer Fee

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 07 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.5509

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Commerce Bank

Mailing Address 1001 Main Street
BB-1

City: Kansas City | State: MO | Zip Code: 64105

Purpose of Disbursement: Wire Transfer Fee

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 09 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 45.00

Transaction ID : SB17.5513

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 105.00

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 Page

FOR LINE NUMBER: (check only one)
☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ethos Advisors LLC

Mailing Address 5134 NW Montebella Dr

City: Riverside | State: MO | Zip Code: 64150

Purpose of Disbursement: Reimbursement for printing, postage, etc

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 10 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 5611.92

Transaction ID : SB17.5524

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Ethos Advisors LLC

Mailing Address 5134 NW Montebella Dr

City: Riverside | State: MO | Zip Code: 64150

Purpose of Disbursement: Consulting Fees

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 10 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 11500.00

Transaction ID : SB17.5525

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Jeffries, Candace, , ,

Mailing Address 17007 NE 121st Terrace

City: Kearney | State: MO | Zip Code: 64060

Purpose of Disbursement: Rent

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 08 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 300.00

Transaction ID : SB17.5510

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 17411.92

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

Image# 202607239894422218

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kimball, Brennan, , ,

Mailing Address 2216 Ashford Street

City: Excelsior Springs | State: MO | Zip Code: 64024

Purpose of Disbursement: Payroll

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 01 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 5500.00

Transaction ID : SB17.5499

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Kimball, Brennan, , ,

Mailing Address 2216 Ashford Street

City: Excelsior Springs | State: MO | Zip Code: 64024

Purpose of Disbursement: Travel Expenses and Parade Supplies

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 01 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 1681.16

Transaction ID : SB17.5505

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Purpose of Disbursement: Media Buy

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 01 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 57000.00

Transaction ID : SB17.5503

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 64181.16

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

Image# 202607239894422219

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Purpose of Disbursement: Media Buy

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 09 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 57000.00

Transaction ID : SB17.5512

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Law Office of James C. Thomas III

Mailing Address 7509 NW Tiffany Springs Pkwy.
Ste. 300

City: Kansas City | State: MO | Zip Code: 64153

Purpose of Disbursement: Legal and Reporting Fees

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 10 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 1536.00

Transaction ID : SB17.5526

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Law Office of James C. Thomas III

Mailing Address 7509 NW Tiffany Springs Pkwy.
Ste. 300

City: Kansas City | State: MO | Zip Code: 64153

Purpose of Disbursement: Legal and Reporting Fees

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 10 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 3930.00

Transaction ID : SB17.5527

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 62466.00

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

Image# 202607239894422220

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Marion County Fair

Mailing Address Requested

City | State | Zip Code

Purpose of Disbursement: Event Tickets

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 02 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 285.00

Transaction ID : SB17.5506

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Pruitt, Johanna, , ,

Mailing Address 3835 Faraon

City: St Joseph | State: MO | Zip Code: 64506

Purpose of Disbursement: In-kind - Meet and Greet Food and Drinks

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 13 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 400.00

Transaction ID : SB17.5593

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Shoal Creek Golf Course

Mailing Address 8905 North Shoal Creek Pkwy.

City: Kansas City | State: MO | Zip Code: 64157

Purpose of Disbursement: Event Costs

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 07 / 13 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 1256.28

Transaction ID : SB17.5516

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 1941.28

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

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NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
STIGALL, CHRIS, , ,
Mailing Address PO BOX 257
City: KEARNEY | State: MO | Zip Code: 64060
Purpose of Disbursement: Campaign Office Rent for May, June, and July
Candidate Name
Category/ Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: MO District: 06
Disbursement For: 2026
☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 08 / 2026
FEC Identification Number: C H6MO06310
Amount of Each Disbursement this Period: 3045.00
Transaction ID : SB17.5511
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For:
☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For:
☐ Primary ☐ General ☐ Other (specify)
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) ▶ 3045.00

TOTAL This Period (last page this line number only) ▶ 156991.76

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)
- [ ] 9
- [X] 10

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

AC Hotel

Mailing Address 867 New Jersey Avenue SE

City: Washington | State: DC | Zip Code: 20003

Nature of Debt (Purpose): Lodging - Credit Card Payment

Transaction ID : SD10.5545

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	25.59	0.00	25.59

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

ArtDept + Benton

Mailing Address 1637 N Buchanan Street

City: Moberly | State: MO | Zip Code: 65270

Nature of Debt (Purpose): Paid with Credit Card

Transaction ID : SD10.5349

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
81.36	0.00	0.00	81.36

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

BP Gas Station

Mailing Address 4632 Paseo Boulevard

City: Kansas City | State: MO | Zip Code: 64110

Nature of Debt (Purpose): Credit Card - Gas

Transaction ID : SD10.5371

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
45.22	0.00	0.00	45.22

1) **SUBTOTALS** This Period This Page (optional) ▶	152.17
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

BullFeathers

Mailing Address 410 1st Street SE

City: Washington | State: DC | Zip Code: 20003

Nature of Debt (Purpose): Food - Credit Card Payment

Transaction ID : SD10.5534

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	65.65	0.00	65.65

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

Canva

Mailing Address 3212 E Cesar Chavez Street Ste 1300

City: Austin | State: TX | Zip Code: 78702

Nature of Debt (Purpose): Paid with Credit Card

Transaction ID : SD10.5358

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
18.00	0.00	0.00	18.00

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

Capitol Hill Club

Mailing Address 300 1st Street SE

City: Washington | State: DC | Zip Code: 20003

Nature of Debt (Purpose): Credit Card - Event

Transaction ID : SD10.5382

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
32.78	0.00	0.00	32.78

1) **SUBTOTALS** This Period This Page (optional) ▶	116.43
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Casey's

Mailing Address 1011 State Street

City: Mound City | State: MO | Zip Code: 64470

Nature of Debt (Purpose): Credit Card - Gas

Transaction ID : SD10.5336

Outstanding Balance Beginning This Period: 33.93

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 33.93

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

Casey's

Mailing Address 912 Walnut Street

City: Tarkio | State: MO | Zip Code: 64491

Nature of Debt (Purpose): Credit Card - Food

Transaction ID : SD10.5338

Outstanding Balance Beginning This Period: 6.16

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 6.16

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

Casey's

Mailing Address 420 W 6th Street

City: Kearney | State: MO | Zip Code: 64060

Nature of Debt (Purpose): Credit Card - Gas and Food

Transaction ID : SD10.5376

Outstanding Balance Beginning This Period: 105.17

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 105.17

1) **SUBTOTALS** This Period This Page (optional) ▶	145.26
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Casey's

Mailing Address 1601 N Missouri Avenue

City: Marceline | State: MO | Zip Code: 64658

Nature of Debt (Purpose): Gas - Credit Card Payment

Transaction ID : SD10.5547

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	26.86	0.00	26.86

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

Casey's

Mailing Address 420 W 6th Street

City: Kearney | State: MO | Zip Code: 64060

Nature of Debt (Purpose): Gas - Credit Card Payment

Transaction ID : SD10.5560

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	42.29	0.00	42.29

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

Cozz Corner

Mailing Address 200 E Nodaway Street

City: Oregon | State: MO | Zip Code: 64473

Nature of Debt (Purpose): Credit Card - Gas

Transaction ID : SD10.5346

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
38.44	0.00	0.00	38.44

1) **SUBTOTALS** This Period This Page (optional) ▶	107.59
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)

FOR LINE NUMBER: (check only one)

- [ ] 9
- [X] 10

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Ethos Advisors LLC

Mailing Address 5134 NW Montebella Dr

City: Riverside | State: MO | Zip Code: 64150

Nature of Debt (Purpose): Expenses

Transaction ID : SD10.5147

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
11500.00	0.00	11500.00	0.00

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

Ethos Advisors LLC

Mailing Address 5134 NW Montebella Dr

City: Riverside | State: MO | Zip Code: 64150

Nature of Debt (Purpose): Expenses

Transaction ID : SD10.5145

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
5611.92	0.00	5611.92	0.00

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

EventBrite

Mailing Address 95 3rd Street
2nd Floor

City: San Francisco | State: CA | Zip Code: 94103

Nature of Debt (Purpose): Credit Card - Event Tickets

Transaction ID : SD10.5391

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
50.00	0.00	0.00	50.00

1) **SUBTOTALS** This Period This Page (optional) ▶	50.00
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Excelsior Springs Area Chamber

Mailing Address 426 S Thompson Avenue

City: Excelsior Springs | State: MO | Zip Code: 64024

Nature of Debt (Purpose): Credit Card - Event

Transaction ID : SD10.5363

Outstanding Balance Beginning This Period: 31.05

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 31.05

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

Expedia

Mailing Address 1111 Expedia Group Way W

City: Seattle | State: WA | Zip Code: 98119

Nature of Debt (Purpose): Lodging - Credit Card Payment

Transaction ID : SD10.5556

Outstanding Balance Beginning This Period: 0.00

Amount Incurred This Period: 609.30

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 609.30

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

Expedia

Mailing Address 1111 Expedia Group Way W

City: Seattle | State: WA | Zip Code: 98119

Nature of Debt (Purpose): Lodging - Credit Card Payment

Transaction ID : SD10.5571

Outstanding Balance Beginning This Period: 0.00

Amount Incurred This Period: 396.63

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 396.63

1) **SUBTOTALS** This Period This Page (optional) ▶	1036.98
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)

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Expedia
Mailing Address 1111 Expedia Group Way W
City: Seattle | State: WA | Zip Code: 98119

Nature of Debt (Purpose):
Lodging - Credit Card Payment

Transaction ID : SD10.5572

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	483.30	0.00	483.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Expedia
Mailing Address 1111 Expedia Group Way W
City: Seattle | State: WA | Zip Code: 98119

Nature of Debt (Purpose):
Lodging - Credit Card Payment

Transaction ID : SD10.5573

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	434.97	0.00	434.97

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Expedia
Mailing Address 1111 Expedia Group Way W
City: Seattle | State: WA | Zip Code: 98119

Nature of Debt (Purpose):
Lodging - Credit Card Payment

Transaction ID : SD10.5574

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	460.41	0.00	460.41

1) **SUBTOTALS** This Period This Page (optional) ▶	1378.68
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Ferox Film

Mailing Address Requested

City: Kansas City | State: MO | Zip Code: 64137

Nature of Debt (Purpose): Technology Services - Credit Card Payment

Transaction ID : SD10.5554

Outstanding Balance Beginning This Period: 0.00

Amount Incurred This Period: 375.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 375.00

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

Flickr Pro

Mailing Address 390 Fremont Street

City: San Francisco | State: CA | Zip Code: 94105

Nature of Debt (Purpose): Paid with Credit Card

Transaction ID : SD10.5361

Outstanding Balance Beginning This Period: 11.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 11.00

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

Freddy's

Mailing Address 228 N Belt Highway

City: St Joseph | State: MO | Zip Code: 64506

Nature of Debt (Purpose): Credit Card - Food

Transaction ID : SD10.5344

Outstanding Balance Beginning This Period: 25.75

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 25.75

1) **SUBTOTALS** This Period This Page (optional) ▶	411.75
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Fuel n Treat

Mailing Address 11630 County Road J

City: Nelson | State: MO | Zip Code: 65347

Nature of Debt (Purpose): Gas - Credit Card Payment

Transaction ID : SD10.5565

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	48.81	0.00	48.81

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

Garden Inn Truck Plaza

Mailing Address 27478 Holt 223

City: Forest City | State: MO | Zip Code: 64451

Nature of Debt (Purpose): Credit Card - Gas and Food

Transaction ID : SD10.5356

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
75.00	0.00	0.00	75.00

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

Google

Mailing Address 251 Little Falls Drive

City: Wilmington | State: DE | Zip Code: 19808

Nature of Debt (Purpose): Technology Services - Credit Card Payment

Transaction ID : SD10.5536

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	14.26	0.00	14.26

1) **SUBTOTALS** This Period This Page (optional) ▶	138.07
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Google Workspace

Mailing Address 1600 Amphitheatre Pkwy

City: Mountain View | State: CA | Zip Code: 94043

Nature of Debt (Purpose): Technology Services - Credit Card Payment

Transaction ID : SD10.5539

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	118.80	0.00	118.80

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

Hobby Lobby

Mailing Address 265 S Stewart Road

City: Liberty | State: MO | Zip Code: 64068

Nature of Debt (Purpose): Supplies - Credit Card Payment

Transaction ID : SD10.5552

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	54.15	0.00	54.15

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

KCI Airport Economy Lot

Mailing Address 601 Brasilia Ave

City: Kansas City | State: MO | Zip Code: 64153

Nature of Debt (Purpose): Travel Expenses - Credit Card Payment

Transaction ID : SD10.5540

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	84.00	0.00	84.00

1) **SUBTOTALS** This Period This Page (optional) ▶	256.95
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)

FOR LINE NUMBER: (check only one)

- [ ] 9
- [X] 10

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Logo

Transaction ID : SD10.5129

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
300.00	0.00	0.00	300.00

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Website

Transaction ID : SD10.5131

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1855.00	0.00	0.00	1855.00

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): DC Fly In

Transaction ID : SD10.5132

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
3000.00	0.00	0.00	3000.00

1) **SUBTOTALS** This Period This Page (optional) ▶	5155.00
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)

FOR LINE NUMBER: (check only one)
- [ ] 9
- [X] 10

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Palm Cards

Outstanding Balance Beginning This Period: 2412.00

Transaction ID : SD10.5133

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 2412.00

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

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Media Production

Outstanding Balance Beginning This Period: 15210.00

Transaction ID : SD10.5136

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 15210.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Text Messages

Outstanding Balance Beginning This Period: 4465.79

Transaction ID : SD10.5139

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 4465.79

1) **SUBTOTALS** This Period This Page (optional) ▶	22087.79
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Text Messages

Transaction ID : SD10.5140

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
529.42	0.00	0.00	529.42

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Tickets

Transaction ID : SD10.5141

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
1720.00	0.00	0.00	1720.00

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Collateral

Transaction ID : SD10.5142

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2185.06	0.00	0.00	2185.06

1) **SUBTOTALS** This Period This Page (optional) ▶	4434.48
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Invoice #59000

Transaction ID : SD10.5143

Outstanding Balance Beginning This Period: 3718.98

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 3718.98

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Invoice #602644

Transaction ID : SD10.5148

Outstanding Balance Beginning This Period: 643.78

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 643.78

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Invoice #60548

Transaction ID : SD10.5149

Outstanding Balance Beginning This Period: 12266.70

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 12266.70

1) **SUBTOTALS** This Period This Page (optional) ▶	16629.46
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)

FOR LINE NUMBER: (check only one)

- [ ] 9
- [X] 10

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Media Production

Transaction ID : SD10.5522

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	8700.00	0.00	8700.00

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

Lagniappe Consulting LLC

Mailing Address 2829 Youree Drive
STE 1 PMB 1030

City: Shreveport | State: LA | Zip Code: 71104

Nature of Debt (Purpose): Fed Ex and Supplies

Transaction ID : SD10.5523

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	246.94	0.00	246.94

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

Law Office of James C. Thomas III

Mailing Address 7509 NW Tiffany Springs Pkwy.
Ste. 300

City: Kansas City | State: MO | Zip Code: 64153

Nature of Debt (Purpose): Legal Fees

Transaction ID : SD10.5137

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
3930.00	0.00	3930.00	0.00

1) **SUBTOTALS** This Period This Page (optional) ▶	8946.94
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Law Office of James C. Thomas III

Mailing Address 7509 NW Tiffany Springs Pkwy. Ste. 300

City: Kansas City | State: MO | Zip Code: 64153

Nature of Debt (Purpose): Legal Fees

Outstanding Balance Beginning This Period: 1536.00

Transaction ID : SD10.5144

Amount Incurred This Period: 0.00

Payment This Period: 1536.00

Outstanding Balance at Close of This Period: 0.00

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

Mailchimp

Mailing Address 405 N Angier Ave NE

City: Atlanta | State: GA | Zip Code: 30308

Nature of Debt (Purpose): Technology Services - Credit Card Payment

Outstanding Balance Beginning This Period: 0.00

Transaction ID : SD10.5567

Amount Incurred This Period: 135.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 135.00

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

McDonalds

Mailing Address 809 State Street

City: Mound City | State: MO | Zip Code: 64470

Nature of Debt (Purpose): Credit Card - Food

Outstanding Balance Beginning This Period: 17.71

Transaction ID : SD10.5340

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 17.71

1) **SUBTOTALS** This Period This Page (optional) ▶	152.71
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

McDonalds

Mailing Address 1106 S Maint Street

City: Maryville | State: MO | Zip Code: 64468

Nature of Debt (Purpose): Credit Card - Food

Transaction ID : SD10.5379

Outstanding Balance Beginning This Period: 27.34

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 27.34

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

New Congressional Liquor & Deli

Mailing Address 404 1st Street SE

City: Washington | State: DC | Zip Code: 20003

Nature of Debt (Purpose): Food - Credit Card Payment

Transaction ID : SD10.5542

Outstanding Balance Beginning This Period: 0.00

Amount Incurred This Period: 28.47

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 28.47

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

Parkville Area Chamber

Mailing Address 8880 Clark Avenue

City: Parkville | State: MO | Zip Code: 64152

Nature of Debt (Purpose): Credit Card - Event

Transaction ID : SD10.5359

Outstanding Balance Beginning This Period: 35.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 35.00

1) **SUBTOTALS** This Period This Page (optional) ▶	90.81
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)

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QuikTrip
Mailing Address 4312 Fredrick Avenue
City: St Joseph | State: MO | Zip Code: 64506

Nature of Debt (Purpose): Credit Card - Gas

Transaction ID : SD10.5354

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
84.82	0.00	0.00	84.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QuikTrip
Mailing Address 411 State Route 92
City: Kearney | State: MO | Zip Code: 64060

Nature of Debt (Purpose): Credit Card - Gas

Transaction ID : SD10.5380

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
51.42	0.00	0.00	51.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QuikTrip
Mailing Address 411 State Route 92
City: Kearney | State: MO | Zip Code: 64060

Nature of Debt (Purpose): Gas - Credit Card Payment

Transaction ID : SD10.5549

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	13.97	0.00	13.97

1) **SUBTOTALS** This Period This Page (optional) ▶	150.21
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

QuikTrip

Mailing Address 4312 Fredrick Avenue

City: St Joseph | State: MO | Zip Code: 64506

Nature of Debt (Purpose): Gas - Credit Card Payment

Transaction ID : SD10.5557

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	65.94	0.00	65.94

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

Raven Printing

Mailing Address 1447 Gentry Street

City: North Kansas City | State: MO | Zip Code: 64116

Nature of Debt (Purpose): Paid with Credit Card

Transaction ID : SD10.5368

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
411.97	0.00	0.00	411.97

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

Raven Printing

Mailing Address 1447 Gentry Street

City: North Kansas City | State: MO | Zip Code: 64116

Nature of Debt (Purpose): Paid with Credit Card

Transaction ID : SD10.5369

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
189.83	0.00	0.00	189.83

1) **SUBTOTALS** This Period This Page (optional) ▶	667.74
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Sam's Club

Mailing Address 8130 N Church Road

City: Kansas City | State: MO | Zip Code: 64158

Nature of Debt (Purpose): Credit Card - Event Supplies

Transaction ID : SD10.5335

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
150.68	0.00	0.00	150.68

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

Sam's Club

Mailing Address 8130 N Church Road

City: Kansas City | State: MO | Zip Code: 64158

Nature of Debt (Purpose): Credit Card - Supplies

Transaction ID : SD10.5370

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
128.14	0.00	0.00	128.14

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

Sam's Club

Mailing Address 8130 N Church Road

City: Kansas City | State: MO | Zip Code: 64158

Nature of Debt (Purpose): Supplies - Credit Card Payment

Transaction ID : SD10.5562

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	142.22	0.00	142.22

1) **SUBTOTALS** This Period This Page (optional) ▶	421.04
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Shoal Creek Golf Course

Mailing Address 8905 North Shoal Creek Pkwy.

City: Kansas City | State: MO | Zip Code: 64157

Nature of Debt (Purpose): Event - Credit Card Payment

Transaction ID : SD10.5568

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	200.00	0.00	200.00

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

Sonic

Mailing Address 510 S Platte City Way

City: Kearney | State: MO | Zip Code: 64060

Nature of Debt (Purpose): Credit Card - Food

Transaction ID : SD10.5366

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
27.99	0.00	0.00	27.99

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

Southwest Airlines

Mailing Address PO Box 36647-1

City: Dallas | State: TX | Zip Code: 75235

Nature of Debt (Purpose): Credit Card - Travel Expenses

Transaction ID : SD10.5381

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
130.00	0.00	0.00	130.00

1) **SUBTOTALS** This Period This Page (optional) ▶	357.99
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Southwest Airlines

Mailing Address PO Box 36647-1

City: Dallas | State: TX | Zip Code: 75235

Nature of Debt (Purpose): Credit Card - Travel Expenses

Transaction ID : SD10.5388

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
45.00	0.00	0.00	45.00

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

Southwest Airlines

Mailing Address PO Box 36647-1

City: Dallas | State: TX | Zip Code: 75235

Nature of Debt (Purpose): Travel Expenses - Credit Card Payment

Transaction ID : SD10.5544

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	45.00	0.00	45.00

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

Speedys #1

Mailing Address 4007 Frederick Avenue

City: St. Joseph | State: MO | Zip Code: 64506

Nature of Debt (Purpose): Gas - Credit Card Payment

Transaction ID : SD10.5564

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	67.38	0.00	67.38

1) **SUBTOTALS** This Period This Page (optional) ▶	157.38
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Starbucks

Mailing Address 521 State Route 92

City: Kearney | State: MO | Zip Code: 64060

Nature of Debt (Purpose): Food - Credit Card Payment

Transaction ID : SD10.5550

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	32.95	0.00	32.95

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

Tarkio Rodeo

Mailing Address 107 S Main Street

City: Rock Port | State: MO | Zip Code: 64482

Nature of Debt (Purpose): Credit Card - Event

Transaction ID : SD10.5342

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
200.00	0.00	0.00	200.00

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

Trex Mart

Mailing Address 1202 W Clay Avenue

City: Plattsburg | State: MO | Zip Code: 64477

Nature of Debt (Purpose): Gas - Credit Card Payment

Transaction ID : SD10.5558

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	74.50	0.00	74.50

1) **SUBTOTALS** This Period This Page (optional) ▶	307.45
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)

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

NAME OF COMMITTEE (In Full)
CHRIS STIGALL FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UBER
Mailing Address 1725 3rd Street
City: San Francisco | State: CA | Zip Code: 94158

Nature of Debt (Purpose):
Credit Card - Travel Expenses

Transaction ID : SD10.5384

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
48.98	0.00	0.00	48.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UBER
Mailing Address 1725 3rd Street
City: San Francisco | State: CA | Zip Code: 94158

Nature of Debt (Purpose):
Travel Expenses - Credit Card Payment

Transaction ID : SD10.5528

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	15.98	0.00	15.98

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UBER
Mailing Address 1725 3rd Street
City: San Francisco | State: CA | Zip Code: 94158

Nature of Debt (Purpose):
Travel Expenses - Credit Card Payment

Transaction ID : SD10.5529

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	14.98	0.00	14.98

1) **SUBTOTALS** This Period This Page (optional) ▶	79.94
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)

FOR LINE NUMBER: (check only one)
- [ ] 9
- [X] 10

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

UBER

Mailing Address 1725 3rd Street

City: San Francisco | State: CA | Zip Code: 94158

Nature of Debt (Purpose): Travel Expenses - Credit Card Payment

Transaction ID : SD10.5530

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	19.88	0.00	19.88

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

UBER

Mailing Address 1725 3rd Street

City: San Francisco | State: CA | Zip Code: 94158

Nature of Debt (Purpose): Travel Expenses - Credit Card Payment

Transaction ID : SD10.5531

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	19.97	0.00	19.97

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

UBER

Mailing Address 1725 3rd Street

City: San Francisco | State: CA | Zip Code: 94158

Nature of Debt (Purpose): Travel Expenses - Credit Card Payment

Transaction ID : SD10.5532

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	40.87	0.00	40.87

1) **SUBTOTALS** This Period This Page (optional) ▶	80.72
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

UBER

Mailing Address 1725 3rd Street

City: San Francisco | State: CA | Zip Code: 94158

Nature of Debt (Purpose): Travel Expenses - Credit Card Payment

Transaction ID : SD10.5533

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	10.88	0.00	10.88

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

United Ventures Consortium Inc

Mailing Address 2711 26th Street NE

City: Washington | State: DC | Zip Code: 20018

Nature of Debt (Purpose): Credit Card - Travel Expenses

Transaction ID : SD10.5386

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
17.14	0.00	0.00	17.14

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

USPS

Mailing Address 1 S Platte Clay Way

City: Kearney | State: MO | Zip Code: 64060

Nature of Debt (Purpose): Postage Supplies - Credit Card Payment

Transaction ID : SD10.5569

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	246.00	0.00	246.00

1) **SUBTOTALS** This Period This Page (optional) ▶	274.02
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

WalMart

Mailing Address 2203 Patsy Lane

City: Excelsior Springs | State: MO | Zip Code: 64024

Nature of Debt (Purpose): Credit Card - Supplies

Transaction ID : SD10.5374

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
43.55	0.00	0.00	43.55

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

WalMart

Mailing Address 2203 Patsy Lane

City: Excelsior Springs | State: MO | Zip Code: 64024

Nature of Debt (Purpose): Supplies - Credit Card Payment

Transaction ID : SD10.5561

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	62.40	0.00	62.40

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

Waters Hardware

Mailing Address 200 W 92 Highway

City: Kearney | State: MO | Zip Code: 64060

Nature of Debt (Purpose): Credit Card - Event Supplies

Transaction ID : SD10.5365

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
13.07	0.00	0.00	13.07

1) **SUBTOTALS** This Period This Page (optional) ▶	119.02
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)

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

NAME OF COMMITTEE (In Full)

CHRIS STIGALL FOR CONGRESS

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

Waters Hardware

Mailing Address 200 W 92 Highway

City: Kearney | State: MO | Zip Code: 64060

Nature of Debt (Purpose): Supplies - Credit Card Payment

Transaction ID : SD10.5555

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	43.87	0.00	43.87

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

Mailing Address

City | State | Zip Code

Nature of Debt (Purpose):

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

Mailing Address

City | State | Zip Code

Nature of Debt (Purpose):

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) ▶	43.87
2) **TOTALS** This Period (last page this line number only) ▶	63950.45
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) ▶	63950.45