

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Lisa McClain Leadership Fund

ADDRESS (number and street) 824 S MILLEDGE AVENUE ATHENS GA 30605

2. FEC IDENTIFICATION NUMBER C C00868091 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: X April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2026 through 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 Kilgore, Paul, , ,

Signature of Treasurer Kilgore, Paul, , , Date 04 / 21 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Lisa McClain Leadership Fund

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2026"/>		<input type="text" value="48253.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="48253.10"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="632650.00"/>	<input type="text" value="632650.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="680903.10"/>	<input type="text" value="680903.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="655660.00"/>	<input type="text" value="655660.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="25243.10"/>	<input type="text" value="25243.10"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Lisa McClain Leadership Fund**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	622350.00	622350.00
(ii) Unitemized .....	300.00	300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	622650.00	622650.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	632650.00	632650.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	632650.00	632650.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	632650.00	632650.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	70223.92	70223.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	70223.92	70223.92
22. Transfers to Affiliated/Other Party Committees.....	585436.08	585436.08
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	655660.00	655660.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	655660.00	655660.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	632650.00	632650.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	632650.00	632650.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	70223.92	70223.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	70223.92	70223.92

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

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

FOR LINE NUMBER: PAGE 6 OF 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BAUER, ADAM, , MR.,**

Mailing Address **2686 N. BLOCK RD.**

City **REESE**    State **MI**    Zip Code **48757-9347**

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

Name of Employer (for Individual)    Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS    INFORMATION REQUESTED PER BE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1500.00**

Date of Receipt  
**03 / 31 / 2026**

**Transaction ID : SA11A.137743**

Amount of Each Receipt this Period  
**1500.00**

Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. BAUER, CHAD, W., MR.,**

Mailing Address **978 N. BLOCK RD.**

City **REESE**    State **MI**    Zip Code **48757-9355**

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

Name of Employer (for Individual)    Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS    INFORMATION REQUESTED PER BE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1500.00**

Date of Receipt  
**03 / 31 / 2026**

**Transaction ID : SA11A.137742**

Amount of Each Receipt this Period  
**1500.00**

Memo Item  
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BAUER, JACKSON, W., MR.,**

Mailing Address **2778 S. TUSCOLA RD.**

City **MUNGER**    State **MI**    Zip Code **48747-9761**

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

Name of Employer (for Individual)    Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS    INFORMATION REQUESTED PER BE

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**03 / 31 / 2026**

**Transaction ID : SA11A.137745**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **3500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. BAUER, TED, W., MR.,</b>		Date of Receipt
Mailing Address 220 N. BLOCK RD.		MM / DD / YYYY 03 / 31 / 2026
City REESE	State MI	Zip Code 48757-9308
FEC ID number of contributing federal political committee. C		Transaction ID : SA11A.137744
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period 1500.00
Occupation (for Individual) INFORMATION REQUESTED PER BE		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. BISCHER, NICOLE, L., MRS.,</b>		Date of Receipt
Mailing Address 187 S. PARISVILLE RD.		MM / DD / YYYY 03 / 31 / 2026
City HARBOR BEACH	State MI	Zip Code 48441-8685
FEC ID number of contributing federal political committee. C		Transaction ID : SA11A.137737
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Amount of Each Receipt this Period 5000.00
Occupation (for Individual) INFORMATION REQUESTED PER BE		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. BRADY, GEORGE, , ,</b>		Date of Receipt
Mailing Address 54772 ALEXIS CT		MM / DD / YYYY 03 / 31 / 2026
City SHELBY TOWNSHIP	State MI	Zip Code 48316-1359
FEC ID number of contributing federal political committee. C		Transaction ID : SA11A.137752
Name of Employer (for Individual) LIPARI FOODS		Amount of Each Receipt this Period 1000.00
Occupation (for Individual) DIRECTOR		<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. BUCHHOLZ, BLAINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7275 CRESCENT BEACH RD.  
 City PIGEON State MI Zip Code 48755-9652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137740**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 CONTRIBUTION

**B. BURK, CATHLEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4972 HEATHER PT  
 City BIRMINGHAM State AL Zip Code 35242-3950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COLLEGIATE ADMISSIONS & RETENTION SOLU Occupation (for Individual) CEO/OWNER/FOUNDER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 12 / 2026  
**Transaction ID : SA11A.131542**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**C. CORRENTE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 591 EVERNIA ST 1713  
 City WEST PALM BEACH State FL Zip Code 33401-5785  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CS CAPITAL GROUP LLC Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 12 / 2026  
**Transaction ID : SA11A.131540**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. EDATTEL, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2625 MARCEY RD  
 City ARLINGTON State VA Zip Code 22207-5231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TODD STRATEGY GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137753**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. ELLIS, JUDITH, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21360 KIPLING  
 City OAK PARK State MI Zip Code 48237-2752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 12 / 2026  
**Transaction ID : SA11A.131544**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. FABRICANT, TODD, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6858 VENIDITA BEACH DR.  
 City DELRAY BEACH State FL Zip Code 33446-5670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137732**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 10 OF 38
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. FIGGERS, FREDDIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5260 WHISPER DR  
 City CORAL SPRINGS State FL Zip Code 33067-2000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FIGGERS.COM Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 12 / 2026  
**Transaction ID : SA11A.131539**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. GONZALEZ, JULIO, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 DUKE DRIVE  
 City LAKE WORTH State FL Zip Code 33460-6363  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GFO Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 12 / 2026  
**Transaction ID : SA11A.131541**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. GRAGG, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5200 METCALF AVE 301  
 City OVERLAND PARK State KS Zip Code 66202-1265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BLUE CHAIR LLC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 10 / 2026  
**Transaction ID : SA11A.131533**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 38
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. GREENBLATT, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 75 TROTTER HILLS CIR  
 City PINEHURST State NC Zip Code 28374-7930  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VETERANS GUARDIAN VA CLAIMS CONSULTING Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 07 / 2026  
**Transaction ID : SA11A.111261**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

**B. GRILLO, RICHARD, ALLEN, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7500 SW 174TH STREET  
 City PALMETTO BAY State FL Zip Code 33157-6309  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LIBERTY HEALTH CARE Occupation (for Individual) DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137729**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
**CONTRIBUTION**

**C. HADDAD, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6680 VACHON COURT  
 City BLOOMFIELD HILLS State MI Zip Code 48301-2937  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BREEZE SMOKE LLC Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 03 / 25 / 2026  
**Transaction ID : SA11A.136076**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	102000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 12 OF 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. HARTSOCK, BILL, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 42708 GATEWAY DRIVE  
 City PLYMOUTH State MI Zip Code 48170-5459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 06 / 2026  
**Transaction ID : SA11A.128831**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**B. HAUBENSTRICKER, M., DEAN, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9635 JUNCTION RD.  
 City FRANKENMUTH State MI Zip Code 48734-9579  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137741**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 CONTRIBUTION

**C. HAUSBECK, DAVID, L., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3447 BAY HARBOR POINT DR.  
 City BAY CITY State MI Zip Code 48706-1976  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137747**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 13 OF 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. HERFORD, ADAM, , MR.,**

Mailing Address **4771 BERNE RD.**

City **ELKTON**    State **MI**    Zip Code **48731-9738**

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

Name of Employer (for Individual)    Occupation (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS    INFORMATION REQUESTED PER BE**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**15000.00**

Date of Receipt  
**03 / 31 / 2026**

**Transaction ID : SA11A.137748**

Amount of Each Receipt this Period  
**15000.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HOUGHTALING, MICHAEL, K., MR.,**

Mailing Address **5559 N. PORTSMOUTH RD.**

City **SAGINAW**    State **MI**    Zip Code **48601-9632**

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

Name of Employer (for Individual)    Occupation (for Individual)  
**INFORMATION REQUESTED PER BEST EFFORTS    INFORMATION REQUESTED PER BE**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**03 / 31 / 2026**

**Transaction ID : SA11A.137746**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. JAFFE, MORRIS, , ,**

Mailing Address **1449 AIRPARK**

City **HORSESHOE BAY**    State **TX**    Zip Code **78657-5703**

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

Name of Employer (for Individual)    Occupation (for Individual)  
**JETTRAN    CEO**

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
**12000.00**

Date of Receipt  
**01 / 31 / 2026**

**Transaction ID : SA11A.117564**

Amount of Each Receipt this Period  
**12000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **32000.00**

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

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

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

FOR LINE NUMBER: PAGE 14 OF 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. JUHNKE, NEIL, , MR.,**

Mailing Address **5237 N. THOMAS RD.**

City **FREELAND** State **MI** Zip Code **48623-8843**

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

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**10000.00**

Date of Receipt  
**03 / 31 / 2026**

**Transaction ID : SA11A.137735**

Amount of Each Receipt this Period  
**10000.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. KEISER, ARTHUR, , ,**

Mailing Address **1900 W COMMERCIAL BLVD**

City **FORT LAUDERDALE** State **FL** Zip Code **33309-7104**

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

Name of Employer (for Individual) **EVERGLADES INC.** Occupation (for Individual) **OWNER**

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt  
**03 / 11 / 2026**

**Transaction ID : SA11A.131537**

Amount of Each Receipt this Period  
**2500.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. KEISER, BELINDA, , MRS.,**

Mailing Address **1900 W COMMERCIAL BLVD**  
**180**

City **FORT LAUDERDALE** State **FL** Zip Code **33309-**

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

Name of Employer (for Individual) **KEISER UNIVERSITY** Occupation (for Individual) **VICE CHANCELLOR**

Receipt For:  
 Primary    General  
 Other (specify)

Aggregate Year-to-Date ▼  
**6500.00**

Date of Receipt  
**03 / 11 / 2026**

**Transaction ID : SA11A.131538**

Amount of Each Receipt this Period  
**3000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **15500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. KEISER, BELINDA, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1900 W COMMERCIAL BLVD  
 180  
 City FORT LAUDERDALE State FL Zip Code 33309-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KEISER UNIVERSITY Occupation (for Individual) VICE CHANCELLOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6500.00

Date of Receipt 03 / 12 / 2026  
**Transaction ID : SA11A.131543**  
 Amount of Each Receipt this Period 3500.00  
 Memo Item  
**CONTRIBUTION**

**B. MARCUS, PAUL, R., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 260 FRANKLIN STREET  
 STE 620  
 City BOSTON State MA Zip Code 02110-3180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137784**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**C. MAURER, JACOB, G., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5186 S. RUTH RD.  
 City RUTH State MI Zip Code 48470-9732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137738**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. MORGAN, NICHOLAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4235 STARLING STREAM DR  
 City SPRING State TX Zip Code 77386-3413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ADAPTIVE CONSTRUCTION SOLUTIONS, INC Occupation (for Individual) WORKFORCE DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt **01 / 30 / 2026**  
**Transaction ID : SA11A.117563**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
**CONTRIBUTION**

**B. MURCIANO, SALOMON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 502 PARK AVE PH 31  
 City NEW YORK State NY Zip Code 10022-1108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 1818 BRANDS Occupation (for Individual) MEMBER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt **03 / 05 / 2026**  
**Transaction ID : SA11A.131529**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
**CONTRIBUTION**

**C. MURCIANO, SALOMON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 502 PARK AVE PH 31  
 City NEW YORK State NY Zip Code 10022-1108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 1818 BRANDS Occupation (for Individual) MEMBER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt **03 / 19 / 2026**  
**Transaction ID : SA11A.133686**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. NIXON, DENNIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 510 MCPHERSON DRIVE  
 City LAREDO State TX Zip Code 78041-2716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IBC BANK Occupation (for Individual) BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12000.00

Date of Receipt 01 / 24 / 2026  
**Transaction ID : SA11A.117556**  
 Amount of Each Receipt this Period 12000.00  
 Memo Item  
**CONTRIBUTION**

**B. PEARCE, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1001 PENNSYLVANIA AVE NW 1300  
 City WASHINGTON State DC Zip Code 20004-2505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CANNON | PEARCE Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 20 / 2026  
**Transaction ID : SA11A.133687**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. PERRY, MICHAEL, D., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2416 NORTH MASELLI STREET  
 City VISALIA State CA Zip Code 93291-9079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SAN JOAQUIN VALLEY COLLEGE Occupation (for Individual) ADMINISTRATOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137781**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. QAZI, MOHAMMAD, A.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 TOWN CENTER SUITE 2000  
 City SOUTHFIELD State MI Zip Code 48075-1415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CIENA HEALTHCARE Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 150000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137726**  
 Amount of Each Receipt this Period 150000.00  
 Memo Item  
**CONTRIBUTION**

**B. SAKWA, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 WILLITS ST APT APT 410  
 City BIRMINGHAM State MI Zip Code 48009-3332  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NOBLE REALTY Occupation (for Individual) REALTOR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 2500.00

Date of Receipt 02 / 20 / 2026  
**Transaction ID : SA11A.126294**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. SANCHEZ, OPHELIA, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 77771 NW 39TH ST  
 City HOLLYWOOD State FL Zip Code 33024-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MIAMI REGIONAL UNIVERSITY Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 5850.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137731**  
 Amount of Each Receipt this Period 5850.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	158350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. SMITH, BRADFORD L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9965 LAKE WASHINGTON BOULEVARD NOR  
 City BELLEVUE State WA Zip Code 98004-6030  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MICROSOFT CORPORATION Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 26 / 2026  
**Transaction ID : SA11A.136079**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. SOUSA, MITSY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1835 OPECHEE DRIVE  
 City MIAMI State FL Zip Code 33133-2431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MIAMI REGIONAL UNIVERSITY Occupation (for Individual) ADMIN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2026  
**Transaction ID : SA11A.131534**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

**C. STAHL, LEWIS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6398 NW 40TH CT  
 City BOCA RATON State FL Zip Code 33496-4007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NEXTGEN MGMT LLC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 03 / 17 / 2026  
**Transaction ID : SA11A.133685**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 38
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. STOCH, LINDA, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 104 VINTAGEISLE LN.  
 City PALM BEACH GARDENS State FL Zip Code 33418-4603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137733**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**B. TALENFELD, MITCHELL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105606 NW 7TH COURT  
 City PLANTATION State FL Zip Code 33324-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MDT MARKETING Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 11 / 2026  
**Transaction ID : SA11A.131536**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
 CONTRIBUTION

**C. TAYLOR, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 WHITEHAVEN DRIVE  
 City PINEHURST State NC Zip Code 28374-6716  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VETERANS GUARDIAN Occupation (for Individual) COO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 06 / 2026  
**Transaction ID : SA11A.111260**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. VALLS, OPHELIA, M., MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13925 SW 107TH CT  
 City MIAMI State FL Zip Code 33176-6502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MRU Occupation (for Individual) EXECUTIVE VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137727**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
**CONTRIBUTION**

**B. VIOLA, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 107 VIA PALACIO  
 City PALM BEACH GARDENS State FL Zip Code 33418-6212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CONGRUITY HR Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 11 / 2026  
**Transaction ID : SA11A.131535**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. WADSWOTH, THOMAS, J., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2193 N. SANDUSKY RD.  
 City SANDUSKY State MI Zip Code 48471-9134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137736**  
 Amount of Each Receipt this Period 35000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	39000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 38
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. WEBSTER, STEVEN, A., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2701 KIRBY DRIVE  
 City HOUSTON State TX Zip Code 77098-1285  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.137783**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 CONTRIBUTION

**B. WINKLEVOSS, CAMERON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 W 24TH ST 4TH FLOOR  
 City NEW YORK State NY Zip Code 10010-3558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WINKLEVOSS CAPITAL MANAGEMENT Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 12000.00

Date of Receipt 01 / 15 / 2026  
**Transaction ID : SA11A.114228**  
 Amount of Each Receipt this Period 12000.00  
 Memo Item  
 CONTRIBUTION

**C. WINKLEVOSS, TYLER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 30 W 24TH ST 4TH FL  
 City NEW YORK State NY Zip Code 10010-3558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WINKLEVOSS CAPITAL MANAGEMENT Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 12000.00

Date of Receipt 01 / 15 / 2026  
**Transaction ID : SA11A.114229**  
 Amount of Each Receipt this Period 12000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	29000.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 38  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. YALDO, RUDI, , ,**

Mailing Address **2707 TURTLE LAKE DR**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48302-0767**

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

Name of Employer (for Individual) **PEARL TRADING LLC** Occupation (for Individual) **CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**25000.00**

Date of Receipt  
**03 / 31 / 2026**

**Transaction ID : SA11A.137730**

Amount of Each Receipt this Period  
**25000.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ZWERK, MARTIN, D., MR.,**

Mailing Address **3530 GARNER RD.**

City **VASSAR** State **MI** Zip Code **48768-9791**

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

Name of Employer (for Individual) **INFORMATION REQUESTED PER BEST EFFORTS** Occupation (for Individual) **INFORMATION REQUESTED PER BE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**03 / 31 / 2026**

**Transaction ID : SA11A.137739**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. DLR GOVERNMENT CONSULTING, LLC**

Mailing Address **319 CLEMATIS ST.  
SUITE 300**

City **WEST PALM BEACH** State **FL** Zip Code **33401-4616**

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**03 / 31 / 2026**

**Transaction ID : SA11A.137734**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**VERIFIED AS FEDERALLY PERMISSIBLE FUNDS ;  
SEE ATTRIBUTION BELOW**

**SUBTOTAL** of Receipts This Page (optional)..... **31000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 38
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. DELAROSA, REBECCA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 319 CLEMATIS ST  
 STE 300  
 City WEST PALM BEACH State FL Zip Code 33401-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DLR GOVERNMENT CONSULTING LLC Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 1000.00

Date of Receipt 03 / 31 / 2026  
**Transaction ID : SA11A.145022**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION  
 PARTNERSHIP ATTRIBUTION

**B. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MOR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1919 M STREET, NW  
 5TH FLOOR  
 City WASHINGTON State DC Zip Code 20036-3572  
 FEC ID number of contributing federal political committee. **C** C00004812  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 50000.00

Date of Receipt 03 / 30 / 2026  
**Transaction ID : SA11C.136077**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
 CONTRIBUTION  
 SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

**C. JONES, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9180 WEST GULL LAKE DR.  
 City RICHLAND State MI Zip Code 49083-9371  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMERIFIRST Occupation (for Individual) EXECUTIVE LEADERSHIP  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 50000.00

Date of Receipt 03 / 21 / 2026  
**Transaction ID : SA11A.136078**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
 CONTRIBUTION  
 EARMARKED FROM MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION CO

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50000.00
<b>TOTAL</b> This Period (last page this line number only).....	622350.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 25 OF 38
<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. SOUTHERN GLAZER'S WINE AND SPIRITS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1600 NW 163 STREET

City MIAMI	State FL	Zip Code 33169-5641
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00217877

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

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

**Transaction ID : SA11C.137782**

Amount of Each Receipt this Period  
10000.00

Memo Item  
**CONTRIBUTION**

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Lisa McClain Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. HERRINGTON, JOANNA, MUELLER, ,**

Mailing Address 520 12TH ST  
APT 1306

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
JFC POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	7			2	0	2	6		

FEC Identification Number

**C**

**Transaction ID : SB21B.I8384**

Amount of Each Disbursement this Period

7618.29

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 1340 POYDRAS ST  
STE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70112

Purpose of Disbursement  
JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	2	6		

FEC Identification Number

**C**

**Transaction ID : SB21B.I7963**

Amount of Each Disbursement this Period

40.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 1340 POYDRAS ST  
STE 1770

City  
NEW ORLEANS

State  
LA

Zip Code  
70112

Purpose of Disbursement  
JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	9			2	0	2	6		

FEC Identification Number

**C**

**Transaction ID : SB21B.I8029**

Amount of Each Disbursement this Period

960.60

Memo Item

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

8619.49

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST  
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY  
01 / 26 / 2026

FEC Identification Number C  
Transaction ID : SB21B.I8077

Amount of Each Disbursement this Period 480.30

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST  
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY  
01 / 31 / 2026

FEC Identification Number C  
Transaction ID : SB21B.I8094

Amount of Each Disbursement this Period 480.30

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST  
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY  
02 / 22 / 2026

FEC Identification Number C  
Transaction ID : SB21B.I8198

Amount of Each Disbursement this Period 100.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1060.90

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST  
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 06 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I8285

Amount of Each Disbursement this Period: 400.30

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST  
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 14 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I8309

Amount of Each Disbursement this Period: 1103.60

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST  
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 23 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I8349

Amount of Each Disbursement this Period: 1040.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2544.50

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST  
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 30 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I8389

Amount of Each Disbursement this Period: 206.61

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST  
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I8431

Amount of Each Disbursement this Period: 80.60

Memo Item

**C. CLASSIC CITY BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2365 W BROAD ST

City ATHENS State GA Zip Code 30606

Purpose of Disbursement JFC BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 06 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I7962

Amount of Each Disbursement this Period: 20.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 307.21

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. CLASSIC CITY BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2365 W BROAD ST

City ATHENS State GA Zip Code 30606

Purpose of Disbursement JFC BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 01 / 30 / 2026

FEC Identification Number C

Transaction ID : SB21B.I8093

Amount of Each Disbursement this Period 20.00

Memo Item

**B. CLASSIC CITY BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2365 W BROAD ST

City ATHENS State GA Zip Code 30606

Purpose of Disbursement JFC BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 04 / 2026

FEC Identification Number C

Transaction ID : SB21B.I8115

Amount of Each Disbursement this Period 20.00

Memo Item

**C. CLASSIC CITY BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2365 W BROAD ST

City ATHENS State GA Zip Code 30606

Purpose of Disbursement JFC BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 17 / 2026

FEC Identification Number C

Transaction ID : SB21B.I8347

Amount of Each Disbursement this Period 20.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 60.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. CLASSIC CITY BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2365 W BROAD ST

City ATHENS State GA Zip Code 30606

Purpose of Disbursement JFC BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 25 / 2026

FEC Identification Number C

Transaction ID : SB21B.I8396

Amount of Each Disbursement this Period 20.00

Memo Item

**B. CLASSIC CITY BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2365 W BROAD ST

City ATHENS State GA Zip Code 30606

Purpose of Disbursement JFC BANK FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 31 / 2026

FEC Identification Number C

Transaction ID : SB21B.I8464

Amount of Each Disbursement this Period 10.00

Memo Item

**C. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement JFC SOFTWARE DATABASE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 01 / 23 / 2026

FEC Identification Number C

Transaction ID : SB21B.I8071

Amount of Each Disbursement this Period 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 280.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Lisa McClain Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
JFC SOFTWARE DATABASE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 24 / 2026

FEC Identification Number

C

Transaction ID : SB21B.I8210

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
JFC SOFTWARE DATABASE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2026

FEC Identification Number

C

Transaction ID : SB21B.I8348

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DEMOCRACY ENGINE**

Mailing Address 416 FLORIDA AVE. NW  
#26418

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
03 / 30 / 2026

FEC Identification Number

C

Transaction ID : SB21B.I8388

Amount of Each Disbursement this Period

3000.30

Memo Item

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

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

3500.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Lisa McClain Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. LILLY AND COMPANY**

Mailing Address 1005 CONGRESS AVE STE 400

City  
AUSTIN

State  
TX

Zip Code  
78701

Purpose of Disbursement  
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I8113**

Amount of Each Disbursement this Period

[Redacted] 4735.26

Memo Item

Full Name (Last, First, Middle Initial)

**B. MAX OUT SOLUTIONS**

Mailing Address 132 THORNTON COURT

City  
ST AUGUSTINE

State  
FL

Zip Code  
32092

Purpose of Disbursement  
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I8181**

Amount of Each Disbursement this Period

[Redacted] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S MILLEDGE AVENUE  
STE 101

City  
ATHENS

State  
GA

Zip Code  
30605

Purpose of Disbursement  
JFC COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I7944**

Amount of Each Disbursement this Period

[Redacted] 3075.33

Memo Item

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

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

[Redacted] 12810.59

[Redacted]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Lisa McClain Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S MILLEDGE AVENUE  
STE 101

City  
ATHENS

State  
GA

Zip Code  
30605

Purpose of Disbursement  
JFC COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I8435

Amount of Each Disbursement this Period

[REDACTED] 3256.83

Memo Item

Full Name (Last, First, Middle Initial)

**B. TEMPLAR BAKER GROUP LLC**

Mailing Address 17800 N LAUREL PARK DR  
STE 200C

City  
LIVONIA

State  
MI

Zip Code  
48152

Purpose of Disbursement  
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I7950

Amount of Each Disbursement this Period

[REDACTED] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. TEMPLAR BAKER GROUP LLC**

Mailing Address 17800 N LAUREL PARK DR  
STE 200C

City  
LIVONIA

State  
MI

Zip Code  
48152

Purpose of Disbursement  
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I8095

Amount of Each Disbursement this Period

[REDACTED] 2519.10

Memo Item

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

[REDACTED] 8275.93

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

[REDACTED]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. TEMPLAR BAKER GROUP LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 17800 N LAUREL PARK DR  
STE 200C

City LIVONIA State MI Zip Code 48152

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 02 / 2026

FEC Identification Number C

Transaction ID : SB21B.I8211

Amount of Each Disbursement this Period 2525.45

Memo Item

**B. TEMPLAR BAKER GROUP LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 17800 N LAUREL PARK DR  
STE 200C

City LIVONIA State MI Zip Code 48152

Purpose of Disbursement JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 03 / 27 / 2026

FEC Identification Number C

Transaction ID : SB21B.I8385

Amount of Each Disbursement this Period 30239.55

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	32765.00
<b>TOTAL</b> This Period (last page this line number only).....▶	70223.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Lisa McClain Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. LISA MCCLAIN FOR CONGRESS**

Mailing Address P.O. BOX 327

City  
ROMEO

State  
MI

Zip Code  
48065

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS

Candidate Name  
MCCLAIN, LISA, , ,

Office Sought:  House  
 Senate  
 President  
State: MI District: 09

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2026

FEC Identification Number

C00726042

**Transaction ID : SB22.I8436**

Amount of Each Disbursement this Period

103038.18

Memo Item

Full Name (Last, First, Middle Initial)

**B. LISA MCCLAIN FOR CONGRESS**

Mailing Address P.O. BOX 327

City  
ROMEO

State  
MI

Zip Code  
48065

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS

Candidate Name  
MCCLAIN, LISA, , ,

Office Sought:  House  
 Senate  
 President  
State: MI District: 09

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2026

FEC Identification Number

C00726042

**Transaction ID : SB22.I8437**

Amount of Each Disbursement this Period

58613.74

Memo Item

Full Name (Last, First, Middle Initial)

**C. LASTING INVESTMENTS STRENGTHENING AMERICA PAC**

Mailing Address PO BOX 327

City  
ROMEO

State  
MI

Zip Code  
48065

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2026

FEC Identification Number

C00764886

**Transaction ID : SB22.I8438**

Amount of Each Disbursement this Period

73200.87

Memo Item

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

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

234852.79

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**Lisa McClain Leadership Fund**

Full Name (Last, First, Middle Initial)

### A. LASTING INVESTMENTS STRENGTHENING AMERICA PAC

Mailing Address PO BOX 327

City  
ROMEO

State  
MI

Zip Code  
48065

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** C00764886

**Transaction ID : SB22.I8451**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. NRCC

Mailing Address 320 FIRST STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS-OPERATING

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** C00075820

**Transaction ID : SB22.I8439**

Amount of Each Disbursement this Period

155242.43

Memo Item

Full Name (Last, First, Middle Initial)

### C. NRCC

Mailing Address 320 FIRST STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS-BUILDING

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

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

FEC Identification Number

**C** C00075820

**Transaction ID : SB22.I8440**

Amount of Each Disbursement this Period

145340.86

Memo Item

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

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

305583.29

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
**Lisa McClain Leadership Fund**

**A. NRCC**

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS-OPERATING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 31 / 2026

FEC Identification Number: C C00075820  
**Transaction ID : SB22.I8452**

Amount of Each Disbursement this Period: 44300.00

Memo Item

**B. NRCC**

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS-BUILDING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 31 / 2026

FEC Identification Number: C C00075820  
**Transaction ID : SB22.I8453**

Amount of Each Disbursement this Period: 700.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	45000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	585436.08