

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

King-Hinds for Congress

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

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|--------------------------------------|---------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | <input type="text" value="7253.81"/> | <input type="text" value="16369.24"/> |
| (b) Total Contribution Refunds (from Line 20(d)) | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | <input type="text" value="7253.81"/> | <input type="text" value="16369.24"/> |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | <input type="text" value="6449.67"/> | <input type="text" value="17544.02"/> |
| (b) Total Offsets to Operating Expenditures (from Line 14) | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | <input type="text" value="6449.67"/> | <input type="text" value="17544.02"/> |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | <input type="text" value="6294.32"/> | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

King-Hinds for Congress

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

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 5620.15 | 8620.15 |
| (ii) Unitemized..... | 0.00 | 25.00 |
| (iii) TOTAL of contributions from individuals ▶ | 5620.15 | 8645.15 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 1633.66 | 7724.09 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 7253.81 | 16369.24 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 7253.81 | 16369.24 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 6449.67 | 17544.02 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 6449.67 | 17544.02 |

III. CASH SUMMARY

| | |
|---|----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 5490.18 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 7253.81 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 12743.99 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 6449.67 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 6294.32 |

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

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

FOR LINE NUMBER: PAGE 5 OF 11
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
King-Hinds for Congress

A. Full Name (Last, First, Middle Initial)
CNMI Treasury

Mailing Address P.O. Box 5234 CHR

City: Saipan State: MP Zip Code: 96950

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2169.56

Date of Receipt: 07 / 25 / 2025

Transaction ID : SA11AI.5275

Amount of Each Receipt this Period: 1079.13

Memo Item
Refund of tax payment

B. Full Name (Last, First, Middle Initial)
Concepcion, Celina, , ,

Mailing Address 4211 Chalan Piao Place

City: Saipan State: MP Zip Code: 96950

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:
retired retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1041.02

Date of Receipt: 07 / 14 / 2025

Transaction ID : SA11AI.5273

Amount of Each Receipt this Period: 1041.02

Memo Item
Donation

C. Full Name (Last, First, Middle Initial)
Osborne, Jason, , ,

Mailing Address 1717 Stanford Avenue

City: Baton Rouge State: LA Zip Code: 70808

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:
Connect Strategy Owner

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 3500.00

Date of Receipt: 07 / 25 / 2025

Transaction ID : SA11AI.5278

Amount of Each Receipt this Period: 3500.00

Memo Item
Donation

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5620.15 |
| TOTAL This Period (last page this line number only).....▶ | 5620.15 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

| | | | |
|--------------------------------------|-------------------------------------|--|------------------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE 6 OF 11 | |
| <input type="checkbox"/> 11a 12 | <input type="checkbox"/> 11b 13a | <input checked="" type="checkbox"/> 11c 13b | <input type="checkbox"/> 11d 14 |
| | | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
King-Hinds for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN BATTLEGROUND FUND

Mailing Address PO BOX 30844

| | | |
|-------------------------|--------------------|--------------------------|
| City BETHESDA | State MD | Zip Code 20824 |
|-------------------------|--------------------|--------------------------|

FEC ID number of contributing federal political committee. **C** **C00857649**

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

| |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 07 / 07 / 2025 |

Transaction ID : SA11C.5280

Amount of Each Receipt this Period

Memo Item
Donation

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

Mailing Address

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

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

| | |
|---|--------------------------------------|
| SUBTOTAL of Receipts This Page (optional)..... ▶ | <input type="text" value="1633.66"/> |
| TOTAL This Period (last page this line number only)..... ▶ | <input type="text" value="1633.66"/> |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 8 OF 11 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
King-Hinds for Congress

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. King-Hinds, Kimberlyn, , , | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2025 |
| Mailing Address P.O. Box 64 | | FEC Identification Number C C00873554 |
| City Tinian | State MP | Zip Code 96952 |
| Purpose of Disbursement Reimbursement - Food and Beverage - Meeting - Crowne Plaza | | Category/ Type 007 |
| Candidate Name King-Hinds for Congress | | Amount of Each Disbursement this Period 60.00 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5303 |
| State: MP District: 01 | | <input type="checkbox"/> Memo Item |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. King-Hinds, Kimberlyn, , , | | Date of Disbursement MM / DD / YYYY 08 / 15 / 2025 |
| Mailing Address P.O. Box 64 | | FEC Identification Number C C00873554 |
| City Tinian | State MP | Zip Code 96952 |
| Purpose of Disbursement Reimbursement - Food and Beverage - Meeting | | Category/ Type 007 |
| Candidate Name King-Hinds for Congress | | Amount of Each Disbursement this Period 179.00 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5299 |
| State: MP District: 01 | | <input type="checkbox"/> Memo Item |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. King-Hinds, Kimberlyn, , , | | Date of Disbursement MM / DD / YYYY 08 / 20 / 2025 |
| Mailing Address P.O. Box 64 | | FEC Identification Number C C00873554 |
| City Tinian | State MP | Zip Code 96952 |
| Purpose of Disbursement Gift - Gloria Nauta | | Category/ Type 003 |
| Candidate Name King-Hinds for Congress | | Amount of Each Disbursement this Period 130.50 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5298 |
| State: MP District: 01 | | <input type="checkbox"/> Memo Item |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 369.50 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 9 OF 11 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
King-Hinds for Congress

| | | | | |
|--|--|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. King-Hinds, Kimberlyn, , , | | | Date of Disbursement MM / DD / YYYY 08 / 26 / 2025 | |
| Mailing Address P.O. Box 64 | | | FEC Identification Number C C00873554 | |
| City Tinian | State MP | Zip Code 96952 | Amount of Each Disbursement this Period 152.50 | |
| Purpose of Disbursement Food and Beverage - JCDomingo Catering, Caravan | | Category/ Type 007 | Transaction ID : SB17.5294 | |
| Candidate Name King-Hinds for Congress | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: MP District: 01 | | | | |

| | | | | |
|--|--|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. King-Hinds, Kimberlyn, , , | | | Date of Disbursement MM / DD / YYYY 09 / 16 / 2025 | |
| Mailing Address P.O. Box 64 | | | FEC Identification Number C C00873554 | |
| City Tinian | State MP | Zip Code 96952 | Amount of Each Disbursement this Period 857.41 | |
| Purpose of Disbursement Reimbursement - Halloween Candy | | Category/ Type 007 | Transaction ID : SB17.5287 | |
| Candidate Name King-Hinds for Congress | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: MP District: 01 | | | | |

| | | | | |
|--|--|------------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Los Caballeros | | | Date of Disbursement MM / DD / YYYY 09 / 08 / 2025 | |
| Mailing Address 308 Pennsylvania Av NE | | | FEC Identification Number C C00873554 | |
| City Washington | State DC | Zip Code 20515 | Amount of Each Disbursement this Period 785.20 | |
| Purpose of Disbursement Food and Beverage - Meeting with Constituents - NMI 902 Team | | Category/ Type 007 | Transaction ID : SB17.5334 | |
| Candidate Name King-Hinds for Congress | | Memo Item <input type="checkbox"/> | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: MP District: 01 | | | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1795.11 |
| TOTAL This Period (last page this line number only).....▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 10 OF 11 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
King-Hinds for Congress

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Majesty Chinese Restaurant | | Date of Disbursement MM / DD / YYYY 08 / 06 / 2025 |
| Mailing Address 1127 NW Beach Road Garapan | | FEC Identification Number C C00873554 |
| City Saipan | State MP | Zip Code 96950 |
| Purpose of Disbursement Food and Beverage - Meeting with Constituents | | Category/Type 007 |
| Candidate Name King-Hinds for Congress | | Amount of Each Disbursement this Period 290.25 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5319 |
| State: MP District: 01 | | <input type="checkbox"/> Memo Item |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Queens Restaurant Tinian | | Date of Disbursement MM / DD / YYYY 09 / 24 / 2025 |
| Mailing Address San Jose Village East | | FEC Identification Number C C00873554 |
| City Tinian | State MP | Zip Code 96952 |
| Purpose of Disbursement Food and Beverage - Meeting with Constituents | | Category/Type 007 |
| Candidate Name King-Hinds for Congress | | Amount of Each Disbursement this Period 230.40 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5341 |
| State: MP District: 01 | | <input type="checkbox"/> Memo Item |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Star Marianas Air | | Date of Disbursement MM / DD / YYYY 08 / 13 / 2025 |
| Mailing Address P. O. Box 520461 | | FEC Identification Number C C00873554 |
| City Tinian | State MP | Zip Code 96952 |
| Purpose of Disbursement Travel | | Category/Type 002 |
| Candidate Name King-Hinds for Congress | | Amount of Each Disbursement this Period 160.00 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : SB17.5323 |
| State: MP District: 01 | | <input type="checkbox"/> Memo Item |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 680.65 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 11 OF 11 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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NAME OF COMMITTEE (In Full)
King-Hinds for Congress

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Star Marianas Air | | Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2025 |
| Mailing Address P. O. Box 520461 | | FEC Identification Number C C00873554 |
| City Tinian | State MP | Zip Code 96952 |
| Purpose of Disbursement Travel | Category/ Type 002 | |
| Candidate Name King-Hinds for Congress | | Amount of Each Disbursement this Period 15.00 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: MP District: 01 | Transaction ID : SB17.5343 <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Talay Thai | | Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2025 |
| Mailing Address 406 1st St | | FEC Identification Number C C00873554 |
| City Washington | State DC | Zip Code 20515 |
| Purpose of Disbursement Food and Beverage - Meeting with Constituent | Category/ Type 007 | |
| Candidate Name King-Hinds for Congress | | Amount of Each Disbursement this Period 167.28 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: MP District: 01 | Transaction ID : SB17.5337 <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Talay Thai | | Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2025 |
| Mailing Address 406 1st St | | FEC Identification Number C C00873554 |
| City Washington | State DC | Zip Code 20515 |
| Purpose of Disbursement Food and Beverage - Meeting with Constituent | Category/ Type 007 | |
| Candidate Name King-Hinds for Congress | | Amount of Each Disbursement this Period 161.96 |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: MP District: 01 | Transaction ID : SB17.5340 <input type="checkbox"/> Memo Item | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 344.24 |
| TOTAL This Period (last page this line number only).....▶ | 4392.92 |