

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

MEUSER FOR CONGRESS

ADDRESS (number and street)

PO BOX 183



Check if different than previously reported. (ACC)

HUDSON

WI

54016-0183

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00654723

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

PA

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

01

Y Y Y Y

2025

through

M M / D D / Y Y Y Y

06

D D / Y Y Y Y

30

Y Y Y Y

2025

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

Type or Print Name of Treasurer THOMAS, DATWYLER,, , ,

Signature of Treasurer

THOMAS, DATWYLER,, , ,

Date

M M / D D / Y Y Y Y

07

D D / Y Y Y Y

15

Y Y Y Y

2025

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

MEUSER FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

MM / DD / YYYY  
06 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	211380.64	543429.94
(b) Total Contribution Refunds (from Line 20(d)) .....	180.00	345.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	211200.64	543084.94
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	197654.79	476049.53
(b) Total Offsets to Operating Expenditures (from Line 14) .....	70.00	16496.97
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	197584.79	459552.56
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	214679.34	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	250000.00	

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

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**MEUSER FOR CONGRESS**

Report Covering the Period:

From:

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

To:

M M / D D / Y Y Y Y  
06 / 30 / 2025**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than  
Political Committees****(i) Itemized (use Schedule A).....**

69138.27

196450.99

**(ii) Unitemized .....**

1242.37

2601.95

**(iii) TOTAL of contributions  
from individuals .....**

70380.64

199052.94

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees  
(such as PACs) .....**

141000.00

344377.00

**(d) The Candidate .....**

0.00

0.00

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

211380.64

543429.94

**12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....**

24145.26

52824.47

**13. LOANS:****(a) Made or Guaranteed by the  
Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

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

0.00

0.00

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

70.00

16496.97

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

0.00

12500.00

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

235595.90

625251.38

# **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.....	197654.79	476049.53
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 .....	30.00	195.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	150.00	150.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	180.00	345.00
21. OTHER DISBURSEMENTS .....	29103.18	73392.03
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	226937.97	549786.56

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	206021.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	235595.90
25. SUBTOTAL (add Line 23 and Line 24).....	441617.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	226937.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	214679.34

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

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

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

NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MARTIN, KAITLYN, MARIE, ,

**A.**Mailing Address 400 WYTHE ST  
APT 423

City

ALEXANDRIA

State

VA

Zip Code

22314-2594

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VERANOOccupation  
VP OF GOV'T AFFAIRS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AB61503E339524C6586A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EHST, RICHARD, , ,

**B.**

Mailing Address 1309 E WYOMISSING BLVD

City

READING

State

PA

Zip Code

19611-1749

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CUSTOMERS BANKOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 14 2025

Transaction ID : A5FE675C00EA842DC815

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PRIDE MOBILITY PRODUCTS CORP

**C.**

Mailing Address 401 YORK AVE

City

DURYEA

State

PA

Zip Code

18642-2025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : ABA43C726B27F4C62A8C

Amount of Each Receipt this Period

3000.00

☐ Memo Item

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CLEMENTS, BRIAN, W, ,

**A.**

Mailing Address 300 N ELM ST

City

WERNERSVILLE

State

PA

Zip Code

19565-1215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

11

2025

Transaction ID : ADF112B6735564CA38BE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STAIMAN, RICHARD, P, MR.,

**B.**

Mailing Address 201 HEPBURN ST

City

WILLIAMSPORT

State

PA

Zip Code

17701-6501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STAIMAN RECYCLING CORP

Occupation

SELF-EMPLOYED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

30

2025

Transaction ID : A8DAC602E27F64569B72

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ISRAEL, RYAN, D., ,

**C.**Mailing Address 2001 15TH ST N  
OFC 719

City

ARLINGTON

State

VA

Zip Code

22201-2756

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BUTERA ISRAEL BECKER

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

03

2025

Transaction ID : A020B439E5C1A4B2CB94

Amount of Each Receipt this Period

500.00

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

2500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SHIVERS, KEVIN, , ,

**A.**

Mailing Address 511 BARBARA DR

City

MECHANICSBURG

State

PA

Zip Code

17050-7213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PA ASSOCIATION OF COMMUNITY BANKERS

Occupation

NON PROFIT EXEC

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

11

2025

Transaction ID : AAE22C60B856B4BB7858

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EVANS, ALBERT, L, , JR.

**B.**

Mailing Address 1368 PARTRIDGE PL N

City

BOYNTON BEACH

State

FL

Zip Code

33436-5408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 22 / 2025

22

2025

Transaction ID : A75E2AC3EEA974AE0811

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SHUSTER, ROBERT, L, ,

**C.**

Mailing Address 123 N 24TH ST

City

CAMP HILL

State

PA

Zip Code

17011-3602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BUCHANAN INGERSOLL &amp; ROONEY PC

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

11

2025

Transaction ID : A0D43165B7F324861BC7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MILNE, JOHN, D., ,

**A.**

Mailing Address 409 G ST SE

City

WASHINGTON

State

DC

Zip Code

20003-4257

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCAPITOL MANAGEMENT

Occupation

SENIOR VP

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AD4E34EF94C6E48DDB90

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ZURN, CRAIG, A., ,

**B.**

Mailing Address 721 CENTER ST

City

JIM THORPE

State

PA

Zip Code

18229-2205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JIM THORPE NEIGHBORHOOD BANK

Occupation

BANKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A6C6EEC8FBF414AD187C

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUDAK, WARREN, S., MR., JR.

**C.**

Mailing Address PO BOX 336

City

NEW CUMBERLAND

State

PA

Zip Code

17070-0336

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HUDAK AND COMPANY

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A4FEA8F0A9B5949BBAB7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

2000.00



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

PAGE 9 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DONNELLY, JAMES, , ,

**A.**

Mailing Address 108 MANOR WOODS CT

City

PAUPACK

State

PA

Zip Code

18451-7755

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WAYNE BANK

Occupation

BANKER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 07 / 2025D D / Y Y Y Y Y  
07 / 2025Y Y Y Y Y  
2025

Transaction ID : A51351A391B8F4D78B05

Amount of Each Receipt this Period

250.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CAMPBELL, J. DUNCAN, , , III

Mailing Address 505 ELM AVE

City

HERSHEY

State

PA

Zip Code

17033-1754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PA BANKERS ASSOCIATION

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 22 / 2025D D / Y Y Y Y Y  
22 / 2025Y Y Y Y Y  
2025

Transaction ID : A8241C70B99D2446C934

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

PATTI, DAVID, W, MR.,

Mailing Address 101 FAIRWAY DR

City

WERNERSVILLE

State

PA

Zip Code

19565-9725

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENNSYLVANIA BUSINESS COUNCIL

Occupation

PRESIDENT &amp; CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AF14C2A35D76C4BC8801

Amount of Each Receipt this Period

1000.00

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

2250.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BLACK, RANDALL, , ,

**A.**

Mailing Address PO BOX 19

City  
LIBERTYState  
PAZip Code  
16930-0019FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FIRST CITIZENS COMMUNITY BANKOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A7E8F333CA2E54EDCB4A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GIRO, GEORGE, E, ,

**B.**

Mailing Address 1974 SHERIDAN ST

City  
WILLIAMSPORTState  
PAZip Code  
17701-3855FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AD64B106728234324A1F

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HILL, VERNON, , ,

**C.**

Mailing Address 262 E MAIN ST

City  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL COOccupation  
ENTREPRENEUR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AF8A8D29E5A7A4287884

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

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

1500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HILL, VERNON, , ,

**A.** Mailing Address 262 E MAIN STCity  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL COOccupation  
ENTREPRENEUR

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A43D19E7F2CD74EE49C8

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

**B.** Full Name (Last, First, Middle Initial)  
HILL, VERNON, , ,  
Mailing Address 262 E MAIN STCity  
MOORESTOWNState  
NJZip Code  
08057-2931FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILL COOccupation  
ENTREPRENEUR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A929F27C60BFB4A12A25

Amount of Each Receipt this Period

5000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.** Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

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

Transaction ID : A6B5F2FBE078048A7B3F

Amount of Each Receipt this Period

5000.00

☒ Memo Item

INTERMEDIARY

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

5000.00

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

PAGE 12 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KIDAN, ADAM, , ,

**A.** Mailing Address 5712 GAUGUIN TER

City

PALM BEACH GARDENS

State

FL

Zip Code

33418-5612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATLANTIC SOLUTIONS GROUP

Occupation

EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A318C2AA47D3542A3B95

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

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

Transaction ID : ADADEF3F118844A40BCA

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

WEINER, KANE, , ,

**C.** Mailing Address 3448 LOCKE LN.

City

HOUSTON

State

TX

Zip Code

77027-4139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TEXAS CRUDE ENERGY

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A8FC8E8F0913F4942B0C

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

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

1000.00

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

PAGE 13 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WEINER, KANE, , ,

**A.**

Mailing Address 3448 LOCKE LN.

City

HOUSTON

State

TX

Zip Code

77027-4139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TEXAS CRUDE ENERGY

Occupation

PRESIDENT

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A0CE32A7C378C448B8D3

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

**B.**

Full Name (Last, First, Middle Initial)

WEINER, KANE, , ,

Mailing Address 3448 LOCKE LN.

City

HOUSTON

State

TX

Zip Code

77027-4139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TEXAS CRUDE ENERGY

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A7F85017E2B274CA1A80

Amount of Each Receipt this Period

5000.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
DEMOCRACYENGINE INC PAC**C.**

Full Name (Last, First, Middle Initial)

DEMOCRACY ENGINE, INC., PAC

Mailing Address 237 FLORIDA AVE NW

City

WASHINGTON

State

DC

Zip Code

20001-1801

FEC ID number of contributing  
federal political committee.

C

C00468314

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

36351.16

Date of Receipt

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

Transaction ID : A4FD7C92C66454447909

Amount of Each Receipt this Period

5000.00

☒ Memo Item

INTERMEDIARY

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CROTTY, THOMAS, , ,

**A.**

Mailing Address 27441 N 96TH WAY

City

SCOTTSDALE

State

AZ

Zip Code

85262-8445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 02 2025

Transaction ID : AE8EE4A27667F4C75A5E

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REDESIGNATION FROM

**B.**

Full Name (Last, First, Middle Initial)

CROTTY, THOMAS, , ,

Mailing Address 27441 N 96TH WAY

City

SCOTTSDALE

State

AZ

Zip Code

85262-8445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 02 2025

Transaction ID : A6AE9BD205A12454A851

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REDESIGNATION TO

**C.**

Full Name (Last, First, Middle Initial)

CROTTY, THOMAS, , ,

Mailing Address 27441 N 96TH WAY

City

SCOTTSDALE

State

AZ

Zip Code

85262-8445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 02 2025

Transaction ID : AEC97903DA87D4F1498E

Amount of Each Receipt this Period

7000.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
DEMOCRACY ENGINE LLC**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

7000.00

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

PAGE 15 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DEMOCRACY ENGINE LLC

**A.**

Mailing Address 416 FLORIDA AVE NW

City

WASHINGTON

State

DC

Zip Code

20001-9901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8009.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 02 2025

Transaction ID : ADEF9ED42695645388F6

Amount of Each Receipt this Period

7000.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

HOLT, LEO, A, MR.,

Mailing Address PO BOX 69

City

GLOUCESTER CITY

State

NJ

Zip Code

08030-0069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOLT LOGISTICS CORP.

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A69121E17D54D411EAF5

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

HOLT, LEO, A, MR.,

Mailing Address PO BOX 69

City

GLOUCESTER CITY

State

NJ

Zip Code

08030-0069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOLT LOGISTICS CORP.

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A769B516C8FCC4F249E9

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

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

5000.00

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

PAGE 16 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOLT, LEO, A, MR.,

**A.**

Mailing Address PO BOX 69

City

GLOUCESTER CITY

State

NJ

Zip Code

08030-0069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOLT LOGISTICS CORP.

Occupation

PRESIDENT

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AF975ABC3B382401CA2B

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

**B.**

Full Name (Last, First, Middle Initial)

BENCARDINO, LOU, , ,

Mailing Address 975 WASHINGTON CROSSING RD

City

NEWTOWN

State

PA

Zip Code

18940-2705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

CONSTRUCTION

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		06		2025

Transaction ID : A45ECA7B9EC634BFFAC8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

81992.69

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		06		2025

Transaction ID : A08A15248D5B84EE6BF5

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

1000.00



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

PAGE 17 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

COON, ANDREW, , ,

**A.**

Mailing Address 139 WASHINGTON SPRING RD

City

PALISADES

State

NY

Zip Code

10964-1613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CFG MERCHANT SOLUTIONS

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AD2ACBA5290E44B8490E

Amount of Each Receipt this Period

3500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

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

Transaction ID : A936DC2E8F3F34D6B850

Amount of Each Receipt this Period

3500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ALBERS, CHARLES, , ,

**C.**Mailing Address 340 S PALM AVE  
UNIT 512

City

SARASOTA

State

FL

Zip Code

34236-6743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : AE5B04F895DA941BC851

Amount of Each Receipt this Period

- 3500.00



Memo Item

REDESIGNATION FROM

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

3500.00

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ALBERS, CHARLES, , ,

**A.**Mailing Address 340 S PALM AVE  
UNIT 512City  
SARASOTAState  
FLZip Code  
34236-6743FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 25 2025

Transaction ID : AA4455AB4D4184501AF7

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REDESIGNATION TO

**B.**

Full Name (Last, First, Middle Initial)

ALBERS, CHARLES, , ,

Mailing Address 340 S PALM AVE  
UNIT 512City  
SARASOTAState  
FLZip Code  
34236-6743FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 25 2025

Transaction ID : A3FFE3CCF9C98427E991

Amount of Each Receipt this Period

7000.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
DEMOCRACYENGINE INC PAC**C.**

Full Name (Last, First, Middle Initial)

DEMOCRACY ENGINE, INC., PAC

Mailing Address 237 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-1801FEC ID number of contributing  
federal political committee.

C C00468314

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36351.16

Date of Receipt

M M / D D / Y Y Y Y Y  
04 25 2025

Transaction ID : A063B60A95133489B8D0

Amount of Each Receipt this Period

7000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

7000.00

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

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

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

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

NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FISHER, JEFFREY, , ,

**A.**

Mailing Address 515 E 72ND ST

City  
NEW YORKState  
NYZip Code  
10021-4032FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOURO UNIVERSITYOccupation  
SPECIAL PROGRAMS ADMINISTRATOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A06E27E6013C845A0BE2

Amount of Each Receipt this Period

500.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
DEMOCRACY ENGINE INC PAC**B.**

Full Name (Last, First, Middle Initial)

DEMOCRACY ENGINE, INC., PAC

Mailing Address 237 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-1801FEC ID number of contributing  
federal political committee.

C C00468314

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36351.16

Date of Receipt

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

Transaction ID : A8C6C5A3EA1004F4CB23

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

LUTES, CHRISTOPHER, , ,

Mailing Address 6505 SAUCON VALLEY DR

City  
FORT WORTHState  
TXZip Code  
76132-5453FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELEVATE CREDITOccupation  
FINANCE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : AC5C2EE6352F04926BD8

Amount of Each Receipt this Period

750.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

**A.**

Mailing Address 4250 FAIRFAX DR  
STE 600

City  
ARLINGTON

State  
VA

Zip Code  
22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

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

Transaction ID : A7EAAE498AF774ABCA8F

Amount of Each Receipt this Period

750.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)  
BARTLETT, CHIP, , ,

**B.**

Mailing Address 906 ELSIE BARBER CT

City  
DAVIDSONVILLE

State  
MD

Zip Code  
21035-1248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

FINANCIAL SERVICES FORUM

LOBBYIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

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

Transaction ID : ACBD59365C8C24E0392C

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED

**C.**

Mailing Address 4250 FAIRFAX DR  
STE 600

City  
ARLINGTON

State  
VA

Zip Code  
22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

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

Transaction ID : AC0A26B44C6AD4A99862

Amount of Each Receipt this Period

1041.02

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

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

1041.02

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ENGLISH, PHILIP, S, ,

**A.**

Mailing Address 1050 LOOKOUT DR

City

ERIE

State

PA

Zip Code

16507-1091

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ARENTFOX SCHIFF LLPOccupation  
GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 04 2025

Transaction ID : A55EFBCB17379417BB34

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

M M / D D / Y Y Y Y Y  
05 04 2025

Transaction ID : AB6CE87DD40F34D3BB99

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

EHRENKRANZ, SANFORD, , ,

Mailing Address 375 PARK AVENUE

City

NEW YORK

State

NY

Zip Code

10152-3804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EHRENKRANZ PARTNERSOccupation  
FINANCIAL ADVISOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

535.72

Date of Receipt

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

Transaction ID : A364A1A47BC244F71A80

Amount of Each Receipt this Period

535.72

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
DEMOCRACY ENGINE INC PAC**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1035.72

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

PAGE 22 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DEMOCRACY ENGINE, INC., PAC

**A.** Mailing Address 237 FLORIDA AVE NW

City

WASHINGTON

State

DC

Zip Code

20001-1801

FEC ID number of contributing  
federal political committee.**C** C00468314

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36351.16

Date of Receipt

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

Transaction ID : A46E0BE04D3804283BD7

Amount of Each Receipt this Period

535.72

☒ Memo Item

INTERMEDIARY

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

Mailing Address 6 BALSAM PL

City

LAFAYETTE HILL

State

PA

Zip Code

19444-2202

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

Name of Employer

MAK CONSULTING SERVICES LLC

Occupation

SENIOR UNDERWRITER PORTFOLIO MANA

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

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

Transaction ID : AD54E0FBD6C564443815

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.** Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

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

Transaction ID : A66A5C9C896C5487BBAD

Amount of Each Receipt this Period

1041.02

☒ Memo Item

INTERMEDIARY

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

1041.02

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BICKEL, KEVIN, , ,

**A.** Mailing Address 175 W ANNANDALE RDCity  
FALLS CHURCHState  
VAZip Code  
22046-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KEVIN BICKEL, JD, LLMOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 23 2025

Transaction ID : A4077B80A0CD8440689A

Amount of Each Receipt this Period

- 1000.00

☒ Memo Item

REATTRIBUTION FROM

Full Name (Last, First, Middle Initial)

BICKEL, DIANE, , ,

**B.** Mailing Address 175 W ANNANDALE RDCity  
FALLS CHURCHState  
VAZip Code  
22046-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FINNEGANOccupation  
IT TRAINER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 23 2025

Transaction ID : A5823E36CDD864F50953

Amount of Each Receipt this Period

1000.00

☒ Memo Item

REATTRIBUTION TO

Full Name (Last, First, Middle Initial)

BICKEL, KEVIN, , ,

**C.** Mailing Address 175 W ANNANDALE RDCity  
FALLS CHURCHState  
VAZip Code  
22046-4207FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KEVIN BICKEL, JD, LLMOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 23 2025

Transaction ID : AC727888C9AE447ECAC5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1000.00

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

PAGE 24 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**Full Name (Last, First, Middle Initial)  
WINRED**A.**Mailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

M M / D D / Y Y Y Y Y  
05 23 2025

Transaction ID : A605C830F4DDB4E07AEE

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

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

Mailing Address 5640 19TH ST N

City  
ARLINGTONState  
VAZip Code  
22205-3152FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

1607 STRATEGIES

GOVT AFFAIRS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 08 2025

Transaction ID : A71603165AAE5493F813

Amount of Each Receipt this Period

3500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**C.**Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

M M / D D / Y Y Y Y Y  
05 08 2025

Transaction ID : A20F9EFC997054CE2869

Amount of Each Receipt this Period

3500.00

☒ Memo Item

INTERMEDIARY

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

3500.00



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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MARTINI, JOHN, , ,

**A.**

Mailing Address 1717 ARCH ST.

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

POLSINELLI PC

Occupation

PARTNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 25 2025

Transaction ID : A545A4FF028B34B66B7B

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

MARTINI, JOHN, , ,

Mailing Address 1717 ARCH ST.

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

POLSINELLI PC

Occupation

PARTNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 25 2025

Transaction ID : A7393AF7CFC2345609B6

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

**C.**

Full Name (Last, First, Middle Initial)

MARTINI, JOHN, , ,

Mailing Address 1717 ARCH ST.

City

CHESTER SPRINGS

State

PA

Zip Code

19425

FEC ID number of contributing  
federal political committee.

C

Name of Employer

POLSINELLI PC

Occupation

PARTNER

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 25 2025

Transaction ID : A90C73B5E155C4200B92

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FOX, WILLIAM, , ,

**A.**

Mailing Address 324 F ST NE

City

WASHINGTON

State

DC

Zip Code

20002-4931

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HB STRATEGIES

Occupation

GOVERNMENT RELATIONS

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A1BB3B38F3E22404B94D

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

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

Transaction ID : A16AE9CAE39E146FBA09

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

CISNEROS, ALEX, , ,

**C.**

Mailing Address 2727 29TH ST NW

City

WASHINGTON

State

DC

Zip Code

20008-5503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INVARIANT

Occupation

DIRECTOR

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

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

Transaction ID : A215AA98B173D44E298A

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1020.51

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 27 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

**A.**

Mailing Address 4250 FAIRFAX DR  
STE 600

City  
ARLINGTON

State  
VA

Zip Code  
22203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

81992.69

Date of Receipt

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

Transaction ID : AC2ECD3CCB51454E9AF

Amount of Each Receipt this Period

520.51

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

0.00

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

69138.27

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

PAGE 28 OF 137

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

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)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

THE COUNCIL OF INSURANCE AGENTS &amp; BROKERS POLITICAL ACTION COMMITTEE

**A.**Mailing Address 701 PENNSYLVANIA AVENUE, NW  
SUITE 750

City

WASHINGTON

State

DC

Zip Code

20004-2608

FEC ID number of contributing  
federal political committee.**C** C00039578

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AE4F9C1C3DEC544A8937

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

NOMURA HOLDING AMERICA INC. PAC (NOMURAPAC)

Mailing Address 801 PENNSYLVANIA AVE NW  
STE 625

City

WASHINGTON

State

DC

Zip Code

20004-2615

FEC ID number of contributing  
federal political committee.**C** C00491951

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : ABDD7AFCAF08F4E52B02

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

ANIMAL WELLNESS ACTION PAC

Mailing Address 611 PENNSYLVANIA AVE SE  
# 136

City

WASHINGTON

State

DC

Zip Code

20003-4303

FEC ID number of contributing  
federal political committee.**C** C00679860

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A3B3E195748844E33B39

Amount of Each Receipt this Period

1000.00

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

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL PAC (STATE FARM FEDERAL PAC)

**A.**

Mailing Address ONE STATE FARM PLAZA

C/O MARK SCHWAMBERGER, TREASURER,

City

BLOOMINGTON

State

IL

Zip Code

61710-0001

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

C00544817

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AAC9C5049766F49659FC

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC

Mailing Address PALLADIAN 1

220 LEIGH FARM RD

City

DURHAM

State

NC

Zip Code

27707-8110

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

C00077321

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

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

Transaction ID : A1E0DE979B7BE4E5B937

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

COMCAST CORPORATION &amp; NBCUNIVERSAL PAC - FEDERAL

Mailing Address 1701 JOHN F KENNEDY BLVD

FL 49

City

PHILADELPHIA

State

PA

Zip Code

19103-2855

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

C00248716

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AD71A1CB79B8F4E3B938

Amount of Each Receipt this Period

1000.00

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

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DELOITTE PAC

**A.**

Mailing Address P.O. BOX 365

City

WASHINGTON

State

DC

Zip Code

20044-0365

FEC ID number of contributing  
federal political committee.**C** C00211318

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	5

Transaction ID : AFB54E0A7CD50423EB31

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FINANCIAL SERVICES FORUM PAC

**B.**Mailing Address 601 13TH ST NW  
STE 750

City

WASHINGTON

State

DC

Zip Code

20005-3807

FEC ID number of contributing  
federal political committee.**C** C00717686

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A9E819B49A2F4421E8E5

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ENCORE CAPITAL GROUP, INC. PAC

**C.**Mailing Address 350 CAMINO DE LA REINA  
STE 100

City

SAN DIEGO

State

CA

Zip Code

92108-3007

FEC ID number of contributing  
federal political committee.**C** C00507392

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A24BF72C73DB24C06B41

Amount of Each Receipt this Period

1500.00

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

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DELOITTE PAC

**A.**

Mailing Address P.O. BOX 365

City

WASHINGTON

State

DC

Zip Code

20044-0365

FEC ID number of contributing  
federal political committee.**C** C00211318

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : ABAE66F10C1DB4CEA9B7

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

NATIONAL FEDERATION OF INDEPENDENT BUSINESS FEDERAL PAC

Mailing Address 555 12TH ST NW SUITE 1001

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00101105

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A2190AB539F9A4D2BA5F

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

NATIONAL FUEL GAS COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 6363 MAIN ST

City

WILLIAMSVILLE

State

NY

Zip Code

14221-5855

FEC ID number of contributing  
federal political committee.**C** C00083758

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A9CA499A2A2504321B67

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JPMORGAN CHASE & CO. FEDERAL PAC**Mailing Address 875 15TH ST NW  
FL 9City  
WASHINGTONState  
DCZip Code  
20005-2221FEC ID number of contributing  
federal political committee.**C** C00104299

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AAB8573D1DC0B4C96B78

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NRA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL RD

City  
FAIRFAXState  
VAZip Code  
22030-7550FEC ID number of contributing  
federal political committee.**C** C00053553

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A364BA7A4D65644D0A3A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION PAC**Mailing Address 1099 NEW YORK AVE NW  
FL 6City  
WASHINGTONState  
DCZip Code  
20001-4411FEC ID number of contributing  
federal political committee.**C** C00431312

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AB5E889D15FB84687BC0

Amount of Each Receipt this Period

1000.00

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

7000.00

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



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

FOR LINE NUMBER: PAGE 33 OF 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SCALISE FOR CONGRESS****A.**

Mailing Address PO BOX 23219

City

NEW ORLEANS

State

LA

Zip Code

70183-0219

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A47404A2FD9264B67829

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 800 TENTH STREET, NW

TWO CITYCENTER, SUITE 400

City

WASHINGTON

State

DC

Zip Code

20001-4956

FEC ID number of contributing  
federal political committee.**C** C00106146

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : AFE35556AAA634EAB85

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**NOMURA HOLDING AMERICA INC. PAC (NOMURAPAC)**

Mailing Address 801 PENNSYLVANIA AVE NW

STE 625

City

WASHINGTON

State

DC

Zip Code

20004-2615

FEC ID number of contributing  
federal political committee.**C** C00491951

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AE18B15350273493AA1A

Amount of Each Receipt this Period

4000.00

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

7000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL READY MIXED CONCRETE ASSN. PAC (CONCRETEPAC)**Mailing Address 66 CANAL CENTER PLZ  
STE 250City  
ALEXANDRIAState  
VAZip Code  
22314-1576FEC ID number of contributing  
federal political committee.**C** C00114025

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A15AB243E8C97409281B

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PATHWARD N.A. PAC**

Mailing Address 5501 S BROADBAND LN

City  
SIOUX FALLSState  
SDZip Code  
57108-2253FEC ID number of contributing  
federal political committee.**C** C00654590

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A9ADBB37822484B73990

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HUNTINGTON BANCSHARES INC. PAC (HBI-PAC)**

Mailing Address 41 SOUTH HIGH STREET

City  
COLUMBUSState  
OHZip Code  
43287FEC ID number of contributing  
federal political committee.**C** C00165589

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : ABA2DF0EB08794F76906

Amount of Each Receipt this Period

2500.00

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

6500.00

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

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

FOR LINE NUMBER: PAGE 35 OF 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

UPPER HAND FUND

**A.**

Mailing Address PO BOX 2485

City  
SPRINGFIELDState  
VAZip Code  
22152-0485FEC ID number of contributing  
federal political committee.**C** C00503151

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 25 2025

Transaction ID : A119874CC27224DDE801

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

**B.**

Mailing Address 539 S MAIN ST

City  
FINDLAYState  
OHZip Code  
45840-3229FEC ID number of contributing  
federal political committee.**C** C00496307

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : A223D9E95E86E42D9B47

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC

**C.**Mailing Address PALLADIAN 1  
220 LEIGH FARM RDCity  
DURHAMState  
NCZip Code  
27707-8110FEC ID number of contributing  
federal political committee.**C** C00077321

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

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

Transaction ID : AB96EC9EF50E94450A2A

Amount of Each Receipt this Period

2500.00

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

12500.00

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

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

FOR LINE NUMBER: PAGE 36 OF 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CONSTELLATION ENERGY CORPORATION EMPLOYEE PAC (CEPAC)**Mailing Address 250 MASSACHUSETTS AVE NW  
STE 760City  
WASHINGTONState  
DCZip Code  
20001-5829FEC ID number of contributing  
federal political committee.**C** C00793711

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ABCB2B28DED9447AEA65

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HIGHMARK PAC**

Mailing Address 1800 CENTER ST

City  
CAMP HILLState  
PAZip Code  
17011-1702FEC ID number of contributing  
federal political committee.**C** C00302844

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AC174F8AE07F44BA2B49

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE**Mailing Address 1615 L STREET, NW  
SUITE 900City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.**C** C00032698

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A68760CC87C174ECFB1F

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PURPLE GOOD GOVERNMENT PAC (PURPLE PAC; PGGPAC; PPAC)****A.**

Mailing Address PO BOX 341027

City  
AUSTINState  
TXZip Code  
78734-0018FEC ID number of contributing  
federal political committee.**C** C00795534

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A5E2825D6805047FAA1D

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PREMIUM CIGAR ASSOCIATION POLITICAL ACTION COMMITTEE (PREMIUM CIGAR PAC)****B.**Mailing Address 513 CAPITOL CT NE  
STE 300City  
WASHINGTONState  
DCZip Code  
20002-7709FEC ID number of contributing  
federal political committee.**C** C00450239

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : ACFFE90B7233C4429A6D

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ASSOCIATED BUILDERS AND CONTRACTORS PAC (ABC PAC)****C.**Mailing Address 440 FIRST STREET NW  
SUITE 200City  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00010421

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AEB3F1E4626C4418ABBD

Amount of Each Receipt this Period

5000.00

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

12500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)

**A.**

Mailing Address 539 S MAIN ST

City  
FINDLAYState  
OHZip Code  
45840-3229FEC ID number of contributing  
federal political committee.**C** C00496307

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : A9AE778A2BF74459887A

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE TRAVELERS COMPANIES, INC. PAC (T-PAC)

**B.**

Mailing Address ONE TOWER SQUARE

City  
HARTFORDState  
CTZip Code  
06183-0001FEC ID number of contributing  
federal political committee.**C** C00376376

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A26A055B55B584D82B0A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STATE STREET BANK AND TRUST COMPANY VOLUNTARY PAC

**C.**

Mailing Address BOX 5351

City  
BOSTONState  
MAZip Code  
02206FEC ID number of contributing  
federal political committee.**C** C00072751

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 22 2025

Transaction ID : A71A522A9C47D4B9D949

Amount of Each Receipt this Period

1000.00

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

7000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WESTERN ALLIANCE BANCORPORATION PAC (WABPAC)****A.**

Mailing Address 1 EAST WASHINGTON ST, STE 1400

City  
PHOENIXState  
AZZip Code  
85004FEC ID number of contributing  
federal political committee.**C** C00817585

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A470F2CE94DDD4963B61

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BUILD PAC OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAC)****B.**

Mailing Address 1201 15TH ST NW

City  
WASHINGTONState  
DCZip Code  
20005-2899FEC ID number of contributing  
federal political committee.**C** C00000901

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AFA85348F8E924D15BEF

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**LOCKHEED MARTIN CORPORATION EMPLOYEES" POLITICAL ACTION COMMITTEE****C.**Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100City  
ARLINGTONState  
VAZip Code  
22202FEC ID number of contributing  
federal political committee.**C** C00303024

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A1742D658F60B4F93982

Amount of Each Receipt this Period

1000.00

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

7000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE**Mailing Address 4300 WILSON BLVD  
STE 800City  
ARLINGTONState  
VAZip Code  
22203-4213FEC ID number of contributing  
federal political committee.**C** C00113241

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A0FD2698661C0462EBAA

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**FIFTH THIRD BANCORP PAC**Mailing Address 801 PENNSYLVANIA AVE NW  
STE 212City  
WASHINGTONState  
DCZip Code  
20004-2677FEC ID number of contributing  
federal political committee.**C** C00290502

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AE7C18A5BA4154A43BD3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)**Mailing Address 1919 M ST NW  
FL 5City  
WASHINGTONState  
DCZip Code  
20036-3572FEC ID number of contributing  
federal political committee.**C** C00004812

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : A0985270CCF7B492C822

Amount of Each Receipt this Period

3000.00

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

5000.00

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



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FULTON FINANCIAL PAC

**A.**Mailing Address ONE PENN SQUARE  
PO BOX 4887City  
LANCASTERState  
PAZip Code  
17604FEC ID number of contributing  
federal political committee.**C** C00400317

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AACE230F1D25A44178DE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION FOR HOMECARE PAC (AAHOMECARE PAC)

**B.**Mailing Address 1400 CRYSTAL DR.  
STE. 460City  
ARLINGTONState  
VAZip Code  
22202FEC ID number of contributing  
federal political committee.**C** C00357129

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A37E2A2850B334907839

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

**C.**Mailing Address 1615 L STREET, NW  
SUITE 900City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.**C** C00032698

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA538FCEDFC124C55BFB

Amount of Each Receipt this Period

1000.00

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

7000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GOOGLE LLC NETPAC

A.

Mailing Address 25 MASSACHUSETTS AVE NW  
FL 9

City

WASHINGTON

State

DC

Zip Code

20001-1430

FEC ID number of contributing  
federal political committee.

C C00428623

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A6C958F9CBDA24624B49

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

ROCK HOLDINGS PAC

Mailing Address 101 S WASHINGTON SQ  
STE 300

City

LANSING

State

MI

Zip Code

48933-1732

FEC ID number of contributing  
federal political committee.

C C00388827

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A92A2427547A64DAC86E

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

WELLS FARGO AND COMPANY EMPLOYEES GOOD GOVERNMENT FEDERAL FUND II

Mailing Address 600 S 4TH STREET, 11TH FLOOR  
MAC N9300-110

City

MINNEAPOLIS

State

MN

Zip Code

55415

FEC ID number of contributing  
federal political committee.

C C00300178

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID : A4B8058F2313C42E5B7B

Amount of Each Receipt this Period

2000.00

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

5500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

COZEN O'CONNOR POLITICAL ACTION COMMITTEE

Mailing Address ONE LIBERTY PLACE

1650 MARKET STREET

City

PHILADELPHIA

State

PA

Zip Code

19103

FEC ID number of contributing  
federal political committee.

C C00312777

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A945DD9C244C84801B40

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE CONSUMER BANKERS ASSOCIATION PAC

Mailing Address 1225 NEW YORK AVE NW

STE 1100

City

WASHINGTON

State

DC

Zip Code

20005-6400

FEC ID number of contributing  
federal political committee.

C C00035535

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AD5E9E5BE2B06478AA2C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1800 K ST NW

DC1-842-05-05

City

WASHINGTON

State

DC

Zip Code

20006-2264

FEC ID number of contributing  
federal political committee.

C C00364778

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A28411A2E7F00487C89B

Amount of Each Receipt this Period

2500.00

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

6000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL FUEL GAS COMPANY FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 6363 MAIN ST

City  
WILLIAMSVILLEState  
NYZip Code  
14221-5855FEC ID number of contributing  
federal political committee.**C** C00083758

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A1936E3012E75405887B

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BANK POLICY INSTITUTE PAC**Mailing Address 1300 I ST NW  
STE 1100City  
WASHINGTONState  
DCZip Code  
20005-4986FEC ID number of contributing  
federal political committee.**C** C00193177

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A0101FDA490E24C8D8F2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THE EYE OF THE TIGER PAC**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-0485FEC ID number of contributing  
federal political committee.**C** C00467431

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A0F53310ED5314A6C963

Amount of Each Receipt this Period

5000.00

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

7500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

UGI CORPORATION PAC(UGI/PAC)

**A.**

Mailing Address 1 UGI DRIVE

City  
DENVERState  
PAZip Code  
17517FEC ID number of contributing  
federal political committee.**C** C00139667

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 07 2025

Transaction ID : A5EF7C3C6FF8D4D29A51

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS

**B.**

Mailing Address 1750 NEW YORK AVE NW

City  
WASHINGTONState  
DCZip Code  
20006-5305FEC ID number of contributing  
federal political committee.**C** C00029447

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ADDD93402FDAC4251957

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN PROPERTY CASUALTY INSURANCE ASSOCIATION PAC (INSURING AMERICA PAC)

**C.**Mailing Address 8700 W BRYN MAWR AVE  
STE 1200SCity  
CHICAGOState  
ILZip Code  
60631-3512FEC ID number of contributing  
federal political committee.**C** C00066472

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : AD35977556BA54A47A37

Amount of Each Receipt this Period

2500.00

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

4500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FEDERAL BIPARTISAN VOLUNTARY PUBLIC AFFAIRS COMMITTEE OF THE PNC FINANCIAL SERVICES GROUP, INC. (...)

**A.**

Mailing Address 800 17TH ST NW

(MAIL STOP C6-CPNC-12-6)

City

WASHINGTON

State

DC

Zip Code

20006-3962

FEC ID number of contributing  
federal political committee.**C** C00186064

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

24

2025

Transaction ID : A4BB851F3F2784023A0D

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

NATIONAL SHOOTING SPORTS FOUNDATION, INC. PAC (NSSF PAC)

Mailing Address 400 N CAPITOL ST NW

STE 475

City

WASHINGTON

State

DC

Zip Code

20001-1593

FEC ID number of contributing  
federal political committee.**C** C00480863

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 13 / 2025

13

2025

Transaction ID : A2FBB528163E3494E82B

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

NATIONAL BEER WHOLESALERS ASSOCIATION PAC

Mailing Address 277 S. WASHINGTON STREET

SUITE 500

City

ALEXANDRIA

State

VA

Zip Code

22314-3672

FEC ID number of contributing  
federal political committee.**C** C00144766

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

24

2025

Transaction ID : ABC4430F5AD3D492B835

Amount of Each Receipt this Period

1000.00

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

4500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HEWLETT PACKARD ENTERPRISE COMPANY PAC**Mailing Address 1001 PENNSYLVANIA AVE NW  
STE 520City  
WASHINGTONState  
DCZip Code  
20004-2549FEC ID number of contributing  
federal political committee.**C** C00196725

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A8CBF2ED09C304FCF89B

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THE GOLDMAN SACHS GROUP, INC. PAC**Mailing Address 101 CONSTITUTION AVE NW  
STE 1000City  
WASHINGTONState  
DCZip Code  
20001-2133FEC ID number of contributing  
federal political committee.**C** C00350744

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A1CBBCF1432D24B12A68

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ALLY FINANCIAL INC. ADVOCACY PAC**Mailing Address 801 PENNSYLVANIA AVE NW  
STE 415City  
WASHINGTONState  
DCZip Code  
20004-3655FEC ID number of contributing  
federal political committee.**C** C00579540

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A7AF96F21971148449F5

Amount of Each Receipt this Period

3000.00

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

10500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RAPTOR PAC****A.**

Mailing Address PO BOX 4864

City  
MIDLANDState  
TXZip Code  
79704-4864FEC ID number of contributing  
federal political committee.**C** C00749481

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AD0030AC90EB6431897B

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**MORGAN STANLEY PAC**Mailing Address 401 9TH ST NW  
STE 650City  
WASHINGTONState  
DCZip Code  
20004-2151FEC ID number of contributing  
federal political committee.**C** C00337626

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A8C04680733204D5787E

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**AMERICAN FINANCIAL SERVICES ASSOCIATION PAC**Mailing Address 919 18TH ST NW  
STE 300City  
WASHINGTONState  
DCZip Code  
20006-5531FEC ID number of contributing  
federal political committee.**C** C00038604

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8500.00

Date of Receipt

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

Transaction ID : A8D1263674934450FB57

Amount of Each Receipt this Period

2500.00

☐ Memo Item

5500.00

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



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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN FINANCIAL SERVICES ASSOCIATION PAC****A.**

Mailing Address 919 18TH ST NW

STE 300

City

WASHINGTON

State

DC

Zip Code

20006-5531

FEC ID number of contributing  
federal political committee.**C** C00038604

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

8500.00

Date of Receipt

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

Transaction ID : AE67C876CB8A64E338E0

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

**B.**

Full Name (Last, First, Middle Initial)

**AMERICAN FINANCIAL SERVICES ASSOCIATION PAC**

Mailing Address 919 18TH ST NW

STE 300

City

WASHINGTON

State

DC

Zip Code

20006-5531

FEC ID number of contributing  
federal political committee.**C** C00038604

Name of Employer

Occupation

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

8500.00

Date of Receipt

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

Transaction ID : A723C7F56CFD649329E6

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

**C.**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM**

Mailing Address 1000 WILSON BLVD

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing  
federal political committee.**C** C00005249

Name of Employer

Occupation

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : A8596389D77A84757BE8

Amount of Each Receipt this Period

5000.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
DEMOCRACY ENGINE INC PAC**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DEMOCRACY ENGINE, INC., PAC

**A.**

Mailing Address 237 FLORIDA AVE NW

City

WASHINGTON

State

DC

Zip Code

20001-1801

FEC ID number of contributing  
federal political committee.

**C** C00468314

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36351.16

Date of Receipt

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

Transaction ID : A2EAC8B4446AE4C90BE7

Amount of Each Receipt this Period

5000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

AMERICAN COUNCIL OF LIFE INSURERS PAC

**B.**

Mailing Address 101 CONSTITUTION AVE NW  
STE 700

City

WASHINGTON

State

DC

Zip Code

20001-2133

FEC ID number of contributing  
federal political committee.

**C** C00147066

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 19 2025

Transaction ID : A65003D16435B4ADF8FD

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH  
DEMOCRACY ENGINE, INC. PAC

Full Name (Last, First, Middle Initial)

DEMOCRACY ENGINE, INC., PAC

**C.**

Mailing Address 237 FLORIDA AVE NW

City

WASHINGTON

State

DC

Zip Code

20001-1801

FEC ID number of contributing  
federal political committee.

**C** C00468314

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

36351.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 19 2025

Transaction ID : AF74BA1D7608F4CBD8BC

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

1000.00

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

141000.00

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**MEUSER VICTORY COMMITTEE**

Mailing Address PO BOX 183

City  
HUDSONState  
WIZip Code  
54016FEC ID number of contributing  
federal political committee.**C** C00832881

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

52824.47

Date of Receipt

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

Transaction ID : A7179BE5B1EE242E59C8

Amount of Each Receipt this Period

17496.95

☐ Memo Item

TRANSFER FROM AUTHORIZED COMMITTEE

Full Name (Last, First, Middle Initial)  
**LEADERSHIP FOR ENTERPRISE AND OPPORTUNITY PAC**Mailing Address 1400 N PROVIDENCE RD  
STE 1040City  
MEDIAState  
PAZip Code  
19063FEC ID number of contributing  
federal political committee.**C** C00466870

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	30	/	2025

Transaction ID : A555D75E99F10479891D

Amount of Each Receipt this Period

1000.00

☒ Memo ItemFull Name (Last, First, Middle Initial)  
**JENKINS, YARDLY, , ,**

Mailing Address 24 MEADOWOOD RD

City  
BRYN MAWRState  
PAZip Code  
19010-1052FEC ID number of contributing  
federal political committee.**C**Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04	/	10	/	2025

Transaction ID : A07482BFCFF8A4F6394B

Amount of Each Receipt this Period

1000.00

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

17496.95

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

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

PAGE 52 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MASUCCI, JEFFREY, , ,

**A.**

Mailing Address 37 COBURGH DR

City

NEPTUNE

State

NJ

Zip Code

07753-7035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CFG MERCHANT SOLUTIONS LLC

Occupation

SENIOR PORTFOLIO MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A0670104CDF4F4651997

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

DEON SR, PASQUALE T, , ,

**B.**

Mailing Address 540 S OXFORD VALLEY RD

City

FAIRLESS HILLS

State

PA

Zip Code

19030-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMI MGT

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A223724159C4F4622B36

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

GALLAGHER, WILLIAM, , ,

**C.**

Mailing Address 85 HIGHLAND AVE

City

CHATHAM

State

NJ

Zip Code

07928-1725

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CFG MERCHANT SOLUTIONS

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A0AB3ED5B922A4FEF8F7

Amount of Each Receipt this Period

3500.00

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

0.00

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

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

PAGE 53 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HUGUENOT, JOE, , ,

**A.**Mailing Address 480 NE 31ST ST  
UNIT 4104City  
MIAMIState  
FLZip Code  
33137-4597FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HUGUENOT WEALTH MANAGEMENT LLCOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AE361147E09F7455BB17

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

WHITE, DAVID, J, MR.,

**B.**

Mailing Address 2747 SPRINGHILL RD

City  
SECANEState  
PAZip Code  
19018-3411FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DWD MECHANICALOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 10 2025

Transaction ID : ADF921158805043B388A

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

ANGELOV, BORIS, , ,

**C.**Mailing Address 685 1ST AVE  
APT 26ECity  
NEW YORKState  
NYZip Code  
10016-2356FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CFG MERCHANT SOLUTIONS LLCOccupation  
PORTFOLIO MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA9E8AED7A18F4513A28

Amount of Each Receipt this Period

1000.00

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

0.00

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

PAGE 54 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JONES, CHARLES, SNOWDEN, ,

**A.** Mailing Address 127 BROAD BROOK RDCity  
BEDFORD HILLSState  
NYZip Code  
10507-2235FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BEDFORD FUNDINGOccupation  
INVESTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 28 2025

Transaction ID : A0512652B8D9C4844948

Amount of Each Receipt this Period

3000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MEUSER VICTORY COMMITTEE

**B.** Mailing Address PO BOX 183City  
HUDSONState  
WIZip Code  
54016FEC ID number of contributing  
federal political committee.

C C00832881

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

52824.47

Date of Receipt

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

Transaction ID : A0A1C1EAFE3714CCA95C

Amount of Each Receipt this Period

1919.40

☐ Memo Item

TRANSFER FROM AUTHORIZED COMMITTEE

Full Name (Last, First, Middle Initial)

CIPRELLO, MICHAEL, , ,

**C.** Mailing Address 25 HILLTOP CIRCity  
LINCROFTState  
NJZip Code  
07738-1444FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CIP VENTURES LLCOccupation  
PORTFOLIO MANAGEMENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A0D8C4A94627549D7AB1

Amount of Each Receipt this Period

1000.00

☒ Memo Item

1919.40

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ABOLT, ROBERT, , ,

**A.** Mailing Address 4 WATERFORD WAYCity  
LINCROFTState  
NJZip Code  
07738-1145FEC ID number of contributing  
federal political committee.

C

Name of Employer  
APPLE GARDEN VENTURESOccupation  
UNDERWRITER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA15D7897CD2249C1B92

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MEUSER VICTORY COMMITTEE

**B.** Mailing Address PO BOX 183City  
HUDSONState  
WIZip Code  
54016FEC ID number of contributing  
federal political committee.

C C00832881

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

52824.47

Date of Receipt

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

Transaction ID : A74123F0DF14740D591A

Amount of Each Receipt this Period

4728.91

☐ Memo Item

TRANSFER FROM AUTHORIZED COMMITTEE

Full Name (Last, First, Middle Initial)

DEON SR, PASQUALE T, , ,

**C.** Mailing Address 540 S OXFORD VALLEY RDCity  
FAIRLESS HILLSState  
PAZip Code  
19030-2615FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PMI MGTOccupation  
OWNER

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A6CE3353212C2417EB13

Amount of Each Receipt this Period

3500.00

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

4728.91

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 56 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WHITE, DAVID, J, MR.,

**A.** Mailing Address 2747 SPRINGHILL RD

City  
SECANE

State  
PA

Zip Code  
19018-3411

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DWD MECHANICAL

Occupation  
PRESIDENT

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2025

Transaction ID : A3BE5020704834FEA847

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

0.00

24145.26



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

PAGE 57 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMTRAK

**A.**

Mailing Address 1 MASSACHUSETTS AVE NW

City

WASHINGTON

State

DC

Zip Code

20001-1401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1105.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 30 2025

Transaction ID : AC7D9D6888CFA41B38A8

Amount of Each Receipt this Period

70.00

☐ Memo Item

TRAVEL REFUNDS

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

70.00

70.00

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

PAGE 58 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BOB GREEN CAR MUSEUM**

Mailing Address 400 E MARKET ST

City  
ORWIGSBURGState  
PAZip Code  
17961-2006Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BDA63A52EF62F48ADA64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LN CONSULTING, LLC**Mailing Address 121 STATE ST  
FL 1City  
HARRISBURGState  
PAZip Code  
17101-1074Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BDA1523B6F14C4D0A8CC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LN CONSULTING, LLC**Mailing Address 121 STATE ST  
FL 1City  
HARRISBURGState  
PAZip Code  
17101-1074Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BA926C5084C1F42FF97B

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

6000.00

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

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

PAGE 59 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LW GROUP PRINTING**

Mailing Address 97 N MAIN ST

City  
SPRING CITYState  
PAZip Code  
19475-1816Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

201.40

Transaction ID : B8606CC3172F14AD4A6F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COSTA, TIMOTHY, , ,**

Mailing Address 1000 NEW JERSEY AVE SE

City  
WASHINGTONState  
DCZip Code  
20003-3312Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B6BE954F9F4824A48B86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

70.56

Transaction ID : B08C48C977123478E8D0

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

2271.96

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

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

PAGE 60 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FEDEX CORPORATION**

Mailing Address 1501 ECKINGTON PL NE

City  
WASHINGTONState  
DCZip Code  
20002-2127Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

79.95

Transaction ID : BD5DE7026A8B6434399F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.50

Transaction ID : BEC658353C0E7486D8EB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.50

Transaction ID : B4C62E1510334497B9E8

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

84.95

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

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

PAGE 61 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THE THEODORE COMPANY**

Mailing Address 8616 BUCKBOARD DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22308-2215Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

15969.00

Transaction ID : BAA533827434647BBB54

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-9901Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

35.18

Transaction ID : B341C9CB627DA43A294A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE THEODORE COMPANY**

Mailing Address 8616 BUCKBOARD DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22308-2215Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : BEE2DACF03E3A48F583E

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

18004.18

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

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

PAGE 62 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AXCAPITAL, LLC**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2305.00

Transaction ID : B151A03602ECE4361A37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

City  
WEST CHESTERState  
PAZip Code  
19382-6413Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7752.00

Transaction ID : BD08460CFD4814FDCA57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WHITESELL, NICK, , ,**

Mailing Address PO BOX 183

City  
HUDSONState  
WIZip Code  
54016-0183Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BA307A8C3F4964B40B41

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

10557.00

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

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

PAGE 63 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WYNDHAM**

Mailing Address 6277 SEA HARBOR DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2025

City  
ORLANDOState  
FLZip Code  
32821-8027

FEC Identification Number

**C**Purpose of Disbursement  
LODGING

001

Amount of Each Disbursement this Period

2.00

Transaction ID : B8C8E7E1BB45243E9A75

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. WYNDHAM**

Mailing Address 6277 SEA HARBOR DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2025

City  
ORLANDOState  
FLZip Code  
32821-8027

FEC Identification Number

**C**Purpose of Disbursement  
LODGING

001

Amount of Each Disbursement this Period

134.87

Transaction ID : BD564877553A5409F830

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. WYNDHAM**

Mailing Address 6277 SEA HARBOR DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2025

City  
ORLANDOState  
FLZip Code  
32821-8027

FEC Identification Number

**C**Purpose of Disbursement  
LODGING

001

Amount of Each Disbursement this Period

134.87

Transaction ID : BEDF8BB2D39BB4D5DAD2

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

271.74

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

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

PAGE 64 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BFC59F30426EC45788EA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B917CD560840546868EC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BC3F7E5265AE64032BF2

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

75.00

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



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

PAGE 65 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

Date of Disbursement

M M	D D	Y Y Y Y
04	08	2025

City  
MC LEANState  
VAZip Code  
22101-5709

FEC Identification Number

**C**Purpose of Disbursement  
BANK FEES

001

Amount of Each Disbursement this Period

25.00

Transaction ID : B3910DA6D231B4DF1A59

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

Date of Disbursement

M M	D D	Y Y Y Y
04	08	2025

City  
WEST CHESTERState  
PAZip Code  
19382-6413

FEC Identification Number

**C**Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

500.00

Transaction ID : BBE233E5AB2034C0EB30

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

Date of Disbursement

M M	D D	Y Y Y Y
04	08	2025

City  
WEST CHESTERState  
PAZip Code  
19382-6413

FEC Identification Number

**C**Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

115.78

Transaction ID : B539D7F927BE444989EB

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

640.78

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

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

PAGE 66 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 911 PANORAMA TRAIL S

Date of Disbursement

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

City  
ROCHESTERState  
NYZip Code  
14625-2311

FEC Identification Number

**C**Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.00

Transaction ID : B8E38C55DA6E4411F953

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209-2517

FEC Identification Number

**C**Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

40.55

Transaction ID : BD674F5E57984495C83E

☐ Memo Item

Office Sought:

<input 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:

District:

Full Name (Last, First, Middle Initial)

**C. FEDEX CORPORATION**

Mailing Address 1501 ECKINGTON PL NE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20002-2127

FEC Identification Number

**C**Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

49.95

Transaction ID : BEE79699189D24FF6B0C

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

100.50

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BRABENDERCOX, LLC**

Mailing Address 1218 GRANDVIEW AVE

Date of Disbursement

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

City  
PITTSBURGHState  
PAZip Code  
15211-1239

FEC Identification Number

**C**Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

554.60

Transaction ID : B29D694C70519436A9E8

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. PAYCHEX**

Mailing Address 911 PANORAMA TRAIL S

Date of Disbursement

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

City  
ROCHESTERState  
NYZip Code  
14625-2311

FEC Identification Number

**C**Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.00

Transaction ID : B944994EC55784783B48

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-1783

FEC Identification Number

**C**Purpose of Disbursement  
ACCOUNTING CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

240.00

Transaction ID : B0739E642BED4423FA96

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

804.60

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

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

PAGE 68 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SHEETZ**

Mailing Address 38 S MARKET ST

City  
ELYSBURGState  
PAZip Code  
17824-9669Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

28.73

Transaction ID : B5B4EB4C19E26416F8C9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RED STAG ENTERPRISES, INC.**

Mailing Address 2610 MOTICHKA ROAD

City  
MADISON TOWNSHIPState  
PAZip Code  
18444-7101Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

716.94

Transaction ID : B6950DCE386B745AEB18

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BRABENDERCOX, LLC**

Mailing Address 1218 GRANDVIEW AVE

City  
PITTSBURGHState  
PAZip Code  
15211-1239Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

554.60

Transaction ID : BB82B0AD4B7FC4DB48C5

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

1300.27

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

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

PAGE 69 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SHEETZ**

Mailing Address 38 S MARKET ST

City  
ELYSBURGState  
PAZip Code  
17824-9669Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

60.70

Transaction ID : BDB302E79913F4F21A0A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BCRC**

Mailing Address PO BOX 326

City  
MOUNT AETNAState  
PAZip Code  
19544-0326Purpose of Disbursement  
DIGITAL ADVERTISING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BC9FE1C93655A4229A46

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HERSHEY COUNTRY CLUB**

Mailing Address 1000 E DERRY RD

City  
HERSHEYState  
PAZip Code  
17033-1244Purpose of Disbursement  
EVENT SITE RENTAL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1141.08

Transaction ID : B66E190AFECB3421780C

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

1701.78

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

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

PAGE 70 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SCHAEER JAFFE LLP**Mailing Address 1717 K ST NW  
STE 900City  
WASHINGTONState  
DCZip Code  
20006-5349Purpose of Disbursement  
LEGAL CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6984.88

Transaction ID : B7A141F4BFE804A3AB2F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-9901Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.04

Transaction ID : BFB8C288E23F24FC09DE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE THEODORE COMPANY**

Mailing Address 8616 BUCKBOARD DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22308-2215Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

28132.92

Transaction ID : BC9BD970893A04E638BC

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

35118.84

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

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

PAGE 71 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AXCAPITAL, LLC**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B10ACA250B88C4854824

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.50

Transaction ID : BCB82765EA8904E02A64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SMITH & WOLLENSKY**

Mailing Address 797 THIRD AVE

City  
NEW YORKState  
NYZip Code  
10022-6226Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

369.20

Transaction ID : B09D3427FF7C34E5B9EF

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

1121.70

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

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

PAGE 72 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FEDEX CORPORATION**

Mailing Address 1501 ECKINGTON PL NE

City  
WASHINGTONState  
DCZip Code  
20002-2127Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

49.95

Transaction ID : BCC091F2D36BC4D7ABA9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN WOMEN OF LUZERNE COUNTY**

Mailing Address 105 LT MICHAEL CLEARY DR

City  
DALLASState  
PAZip Code  
18612-1639Purpose of Disbursement  
DONATION

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B233642FC541D4F38810

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BEFBDC0A36DFC4F72ADB

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

574.95

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



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

PAGE 73 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ORIGINAL GARDEN BILAL, LLC**

Mailing Address 40 MAPLEWOOD MALL

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

City  
PHILADELPHIAState  
PAZip Code  
19144-2810

FEC Identification Number

**C**Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

15000.00

Transaction ID : B7697D613402A40299BB

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22209-2517

FEC Identification Number

**C**Purpose of Disbursement  
CREDIT CARD FEES

001

Amount of Each Disbursement this Period

58.63

Transaction ID : BA5853CF5B9414750B65

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input 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:

District:

Full Name (Last, First, Middle Initial)

**C. THE CARNEGIE CLUB**

Mailing Address 156 W 56TH ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

City  
NEW YORKState  
NYZip Code  
10019-3800

FEC Identification Number

**C**Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

444.65

Transaction ID : B5D1E297DEA1D45E99A4

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

15503.28

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

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

PAGE 74 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

City  
MC LEANState  
VAZip Code  
22101-5709

FEC Identification Number

**C**Purpose of Disbursement  
BANK FEES

001

Amount of Each Disbursement this Period

25.00

Transaction ID : BC19EDEECB3194916B96

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

City  
WEST CHESTERState  
PAZip Code  
19382-6413

FEC Identification Number

**C**Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

5460.00

Transaction ID : B83654CADEC1B4372BDE

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

City  
WASHINGTONState  
DCZip Code  
20003-1801

FEC Identification Number

**C**Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

285.09

Transaction ID : B6A639105956042E6A1A

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

5770.09

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

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

PAGE 75 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

316.62

Transaction ID : B09AAA8D589C046C2ABD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address 205 PENNSYLVANIA AVENUE, SE

City  
WASHINGTONState  
DCZip Code  
20003-1164Purpose of Disbursement  
DATABASE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2400.00

Transaction ID : BFA009BDF7B2545649A9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETZ**

Mailing Address 38 S MARKET ST

City  
ELYSBURGState  
PAZip Code  
17824-9669Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

33.17

Transaction ID : BE2AD97DA85B942EBA33

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

2749.79

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.99

Transaction ID : B21A73222E59048D2BDC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SMOKE-ONOS CIGAR FESTIVALS**

Mailing Address 1 HILLSIDE DR

City  
DRUMSState  
PAZip Code  
18222-2148Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2660.60

Transaction ID : BE55BE679FB884CF4A93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B19ABAC719BC9415596B

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

2686.59

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

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

PAGE 77 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SMOKE-ONOS CIGAR FESTIVALS**

Mailing Address 1 HILLSIDE DR

Date of Disbursement

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

City  
DRUMSState  
PAZip Code  
18222-2148

FEC Identification Number

**C**Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2418.92

Transaction ID : B6B0D1A12593C4FF394A

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20001-9901

FEC Identification Number

**C**Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

432.08

Transaction ID : B75AB411548864C9797B

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SMOKE-ONOS CIGAR FESTIVALS**

Mailing Address 1 HILLSIDE DR

Date of Disbursement

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

City  
DRUMSState  
PAZip Code  
18222-2148

FEC Identification Number

**C**Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

636.00

Transaction ID : B99088DE4581C4587812

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

3487.00

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

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

PAGE 78 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. COSTA, TIMOTHY, , ,**

Mailing Address 1000 NEW JERSEY AVE SE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20003-3312

FEC Identification Number

**C**Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B113C428394514D158D9

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. DATTE, EVELYN, , ,**

Mailing Address 1650 HOWARD AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2025

City  
POTTSVILLEState  
PAZip Code  
17901-3218

FEC Identification Number

**C**Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B60D7E683E45A48B297D

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. VERGNETTI, LEO, P., MR.,**

Mailing Address 519 ARTHUR AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		30		2025

City  
SCRANTONState  
PAZip Code  
18510-2356

FEC Identification Number

**C**Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : BC1DDEC2BCEEB46BE8B8

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

5000.00

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

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

PAGE 79 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WHITESELL, NICK, , ,**

Mailing Address PO BOX 183

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-0183

FEC Identification Number

**C**Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B45C9ADC77FD9453E850

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

Date of Disbursement

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

City  
MC LEANState  
VAZip Code  
22101-5709

FEC Identification Number

**C**Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

25.00

Transaction ID : BCBFD646281A944B7A31

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

Date of Disbursement

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

City  
MC LEANState  
VAZip Code  
22101-5709

FEC Identification Number

**C**Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

25.00

Transaction ID : B79078B99A7ED4895985

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

550.00

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

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

PAGE 80 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B162EF60FA7D148AE9F1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.22

Transaction ID : B3AF98EA03DED4623B7B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LN CONSULTING, LLC**Mailing Address 121 STATE ST  
FL 1City  
HARRISBURGState  
PAZip Code  
17101-1074Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : BC3A69BB9EDEA40FD90C

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

4030.22

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



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

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

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NAME OF COMMITTEE (In Full)

MEUSER FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.79

Transaction ID : B91E93F6A55FE4EE685C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SHEETZ**

Mailing Address 38 S MARKET ST

City  
ELYSBURGState  
PAZip Code  
17824-9669Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

36.47

Transaction ID : B143E49DA4B144121B1E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

City  
HUDSONState  
WIZip Code  
54016-1783Purpose of Disbursement  
CAGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

138.25

Transaction ID : BD47FA8F6AFC646E1AE1

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

175.51

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

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

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

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NAME OF COMMITTEE (In Full)

MEUSER FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FEDEX CORPORATION**

Mailing Address 1501 ECKINGTON PL NE

City  
WASHINGTONState  
DCZip Code  
20002-2127Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

49.95

Transaction ID : BB28E3B1E16FC44E7B4A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AXCAPITAL, LLC**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2305.00

Transaction ID : BDF46FF04D52F4725866

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETZ**

Mailing Address 38 S MARKET ST

City  
ELYSBURGState  
PAZip Code  
17824-9669Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

72.48

Transaction ID : BCF381CD0C4B749EFB4E

☐ Memo Item

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

2427.43

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-9901Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.62

Transaction ID : BF9B571E691C843BDBC3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LW GROUP PRINTING**

Mailing Address 97 N MAIN ST

City  
SPRING CITYState  
PAZip Code  
19475-1816Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

100.70

Transaction ID : BE3B261240355478EAFE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

179.11

Transaction ID : BCD39C61D25D64F6D945

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

280.43

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

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

PAGE 84 OF 137

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

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NAME OF COMMITTEE (In Full)

MEUSER FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. NEW CONGRESSIONAL**

Mailing Address 404 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1826Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

49.65

Transaction ID : B06F00FC527E045179E0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NEW CONGRESSIONAL**

Mailing Address 404 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1826Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

27.00

Transaction ID : B64C86384079442E897C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PAYCHEX**

Mailing Address 911 PANORAMA TRAIL S

City  
ROCHESTERState  
NYZip Code  
14625-2311Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

28.00

Transaction ID : B857E368EF50E4904878

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

104.65

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ANGRY BURRITO COMPANY**

Mailing Address 105 N LEHIGH AVE

City  
SAYREState  
PAZip Code  
18840-2250Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1033.50

Transaction ID : B4C9C3827FB354E83889

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FITZGERALD, TJ, , ,**

Mailing Address 163 ALDEN MOUNTAIN RD

City  
NANTICOKEState  
PAZip Code  
18634-4201Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B7E0F1809DE2A47E7BAC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE THEODORE COMPANY**

Mailing Address 8616 BUCKBOARD DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22308-2215Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B5A83DCE61AA74170A92

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

4033.50

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BRABENDERCOX, LLC**

Mailing Address 1218 GRANDVIEW AVE

Date of Disbursement

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

City  
PITTSBURGHState  
PAZip Code  
15211-1239

FEC Identification Number

**C**Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

554.60

Transaction ID : BBD2F7B86DFCF43B8BBA

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209-2517

FEC Identification Number

**C**Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2.77

Transaction ID : BFE5072F9D7D24742AFD

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

Date of Disbursement

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

City  
MC LEANState  
VAZip Code  
22101-5709

FEC Identification Number

**C**Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2.50

Transaction ID : B4DAC35560B9842C3850

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

559.87

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

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

PAGE 87 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RED STAG ENTERPRISES, INC.**

Mailing Address 2610 MOTICHKA ROAD

City  
MADISON TOWNSHIPState  
PAZip Code  
18444-7101Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BB3F4B4E9CC6C491CAEE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.40

Transaction ID : B6526FE40C0E9401D9A8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FEDEX CORPORATION**

Mailing Address 1501 ECKINGTON PL NE

City  
WASHINGTONState  
DCZip Code  
20002-2127Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

49.95

Transaction ID : B89AF54234CEC42F1B9A

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

573.35

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

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

PAGE 88 OF 137

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

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NAME OF COMMITTEE (In Full)

MEUSER FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BEST CIGAR PUB**

Mailing Address 3 HILLSIDE DR

Date of Disbursement

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

City  
DRUMSState  
PAZip Code  
18222-2148

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

18.55

Transaction ID : B88929F3A514640229E1

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. BEST CIGAR PUB**

Mailing Address 3 HILLSIDE DR

Date of Disbursement

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

City  
DRUMSState  
PAZip Code  
18222-2148

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

222.60

Transaction ID : B3C8F145CFCA8498E83C

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. BEST CIGAR PUB**

Mailing Address 3 HILLSIDE DR

Date of Disbursement

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

City  
DRUMSState  
PAZip Code  
18222-2148

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

11.53

Transaction ID : B7A24D56478C5419E9C7

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

252.68

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



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

PAGE 89 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BEST CIGAR PUB**

Mailing Address 3 HILLSIDE DR

City  
DRUMSState  
PAZip Code  
18222-2148Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6.36

Transaction ID : B8F4E3449EA164E7C9CF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE NW

City  
WASHINGTONState  
DCZip Code  
20004-2601Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : B783F9049E26C4775B60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CANDLEWOOD SUITES**Mailing Address 3 RAVINIA DR  
STE 100City  
ATLANTAState  
GAZip Code  
30346-2121Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

131.80

Transaction ID : B71E31EA1E74C4DAF933

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

338.16

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

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

PAGE 90 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CANDLEWOOD SUITES**Mailing Address 3 RAVINIA DR  
STE 100City  
ATLANTAState  
GAZip Code  
30346-2121Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

131.80

Transaction ID : BE7B010388D44466C81D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CANDLEWOOD SUITES**Mailing Address 3 RAVINIA DR  
STE 100City  
ATLANTAState  
GAZip Code  
30346-2121Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

131.80

Transaction ID : B732EFF108F494730A29

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BEST CIGAR PUB**

Mailing Address 3 HILLSIDE DR

City  
DRUMSState  
PAZip Code  
18222-2148Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

374.64

Transaction ID : B68FC9CC19B0945EBB70

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

638.24

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

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

PAGE 91 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CANDLEWOOD SUITES**Mailing Address 3 RAVINIA DR  
STE 100City  
ATLANTAState  
GAZip Code  
30346-2121Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

131.80

Transaction ID : B18D692C41F7E4A3582F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CANDLEWOOD SUITES**Mailing Address 3 RAVINIA DR  
STE 100City  
ATLANTAState  
GAZip Code  
30346-2121Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

131.80

Transaction ID : B9BAB1338730643C7BC2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CANDLEWOOD SUITES**Mailing Address 3 RAVINIA DR  
STE 100City  
ATLANTAState  
GAZip Code  
30346-2121Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

131.80

Transaction ID : B9C060F92319F4544848

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

395.40

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

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

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CANDLEWOOD SUITES**Mailing Address 3 RAVINIA DR  
STE 100City  
ATLANTAState  
GAZip Code  
30346-2121Purpose of Disbursement  
LODGING

001

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

131.80

Transaction ID : BF886EBE21F7F4043B8F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE NW

City  
WASHINGTONState  
DCZip Code  
20004-2601Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

187.78

Transaction ID : B5F82DEBDCA94440CBD5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BEST CIGAR PUB**

Mailing Address 3 HILLSIDE DR

City  
DRUMSState  
PAZip Code  
18222-2148Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

81.82

Transaction ID : B11406AF81F0E48B0A3D

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

401.40

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

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

PAGE 93 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CANDLEWOOD SUITES**Mailing Address 3 RAVINIA DR  
STE 100City  
ATLANTAState  
GAZip Code  
30346-2121Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

131.80

Transaction ID : B84CD2E96DE074308829

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BEST CIGAR PUB**

Mailing Address 3 HILLSIDE DR

City  
DRUMSState  
PAZip Code  
18222-2148Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

73.60

Transaction ID : B2FF57DA84BEC4292BDF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BD17982B4E7C14648BD9

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

230.40

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

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

PAGE 94 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.29

Transaction ID : B1EAA304AFCD04C4AAA2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MAR-A-LAGO CLUB LLC**

Mailing Address 1100 S OCEAN BLVD

City  
PALM BEACHState  
FLZip Code  
33480-5004Purpose of Disbursement  
FUNDRAISING EVENT FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4489.89

Transaction ID : BA4B2559365474CCBA16

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

City  
WEST CHESTERState  
PAZip Code  
19382-6413Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3185.00

Transaction ID : B849316DB05EA491BB55

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

7678.18

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

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

PAGE 95 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

City  
WEST CHESTERState  
PAZip Code  
19382-6413Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BEE0E50131EA843008C5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B6DD65B9E8786449A973

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BA53ED11861D64D38A9D

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

550.00

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

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

PAGE 96 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. COSTA, TIMOTHY, , ,**

Mailing Address 1000 NEW JERSEY AVE SE

City  
WASHINGTONState  
DCZip Code  
20003-3312Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : BE0E4FA4C1FFC46C7B45

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-9901Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.05

Transaction ID : B992B3DAB0B0D404A976

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMTRAK**

Mailing Address 1 MASSACHUSETTS AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-1401Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

70.00

Transaction ID : BC2295D61D58C4933979

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

2070.05

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



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

PAGE 97 OF 137

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

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

42.65

Transaction ID : B2B2948C2079C46EB850

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.50

Transaction ID : BB3FEF972883D487182E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.50

Transaction ID : BE5E1E9B92BB8401A9DC

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

47.65

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address 1 MASSACHUSETTS AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-1401Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

87.00

Transaction ID : BB615133A2B6A40BCA75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-9901Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.03

Transaction ID : B762F409670104F0A8E9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE THEODORE COMPANY**

Mailing Address 8616 BUCKBOARD DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22308-2215Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7066.90

Transaction ID : B8CF1EFD29989485EB02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7453.93

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THE THEODORE COMPANY**

Mailing Address 8616 BUCKBOARD DRIVE

City  
ALEXANDRIAState  
VAZip Code  
22308-2215Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B84EC7CBF7C604B16BE4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BD52C8BE7F3874D54BFE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BB02C60393F864B48AFC

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2050.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 100 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VERGNETTI, LEO, P., MR.,**

Mailing Address 519 ARTHUR AVE

City  
SCRANTONState  
PAZip Code  
18510-2356Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B161D06581B354229B34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WHITESELL, NICK, , ,**

Mailing Address PO BOX 183

City  
HUDSONState  
WIZip Code  
54016-0183Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B68B952E3FE1F454EAE3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DATTE, EVELYN, , ,**

Mailing Address 1650 HOWARD AVE

City  
POTTSVILLEState  
PAZip Code  
17901-3218Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B60CD79BAA287423A954

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3500.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 101 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2025

City  
MC LEANState  
VAZip Code  
22101-5709

FEC Identification Number

**C**Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

25.00

Transaction ID : B0DDE85F4AD7E4D7CB6E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2025

City  
ARLINGTONState  
VAZip Code  
22209-2517

FEC Identification Number

**C**Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.70

Transaction ID : BF0E2F8B62939422982E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2025

City  
WASHINGTONState  
DCZip Code  
20001-9901

FEC Identification Number

**C**Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

420.60

Transaction ID : BE4DD2CF7D70A457B89F

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

447.30

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 102 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LN CONSULTING, LLC**Mailing Address 121 STATE ST  
FL 1City  
HARRISBURGState  
PAZip Code  
17101-1074Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : BE0DA0D93121E413D8DA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EXXONMOBIL**

Mailing Address 2020 K ST NW STE 800,

City  
WASHINGTONState  
DCZip Code  
20006-1820Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

120.00

Transaction ID : B99E52986A76243A5B33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

City  
HUDSONState  
WIZip Code  
54016-1783Purpose of Disbursement  
CAGING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21.00

Transaction ID : B61493DE8F4FC4D42BC1

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4141.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 103 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AXCAPITAL, LLC**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2305.00

Transaction ID : BC9A711B269784E28BE9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.79

Transaction ID : BDD96B771341B471BBF9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE PHILADELPHIA INQUIRER**

Mailing Address PO BOX 8263

City  
PHILADELPHIAState  
PAZip Code  
19101-8263Purpose of Disbursement  
OFFICE SUBSCRIPTION

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

27.96

Transaction ID : B5881DDC45C22425891C

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2335.75

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 104 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FEDEX CORPORATION**

Mailing Address 1501 ECKINGTON PL NE

City  
WASHINGTONState  
DCZip Code  
20002-2127Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

49.95

Transaction ID : BBB70CD81DDF246399BB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WILLIAMSPORT/LYCOMING CHAMBER OF COMMERCE**

Mailing Address 102 W. FOURTH ST

City  
WILLIAMSPORTState  
PAZip Code  
17701-6061Purpose of Disbursement  
EVENT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B30DB001774AB459BA26

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B083BA7A9E6954A95B62

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

324.95

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 105 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL BAR**

Mailing Address 15710 PISSARO TERRACE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

City  
NORTH POTOMACState  
MDZip Code  
20878-3480

FEC Identification Number

**C**Purpose of Disbursement  
EVENT FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

275.00

Transaction ID : B8CD8F91E28CD40C0A6D

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 55 GLENLAKE PKWY NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2025

City  
ATLANTAState  
GAZip Code  
30328-3474

FEC Identification Number

**C**Purpose of Disbursement  
SHIPPING & POSTAGE

001

Amount of Each Disbursement this Period

112.00

Transaction ID : B361F01DC025A418B914

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. FEDEX CORPORATION**

Mailing Address 1501 ECKINGTON PL NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2025

City  
WASHINGTONState  
DCZip Code  
20002-2127

FEC Identification Number

**C**Purpose of Disbursement  
POSTAGE

001

Amount of Each Disbursement this Period

49.95

Transaction ID : BA8755091E6974F44AC4

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

436.95

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 106 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RED STAG ENTERPRISES, INC.**

Mailing Address 2610 MOTICHKA ROAD

City  
MADISON TOWNSHIPState  
PAZip Code  
18444-7101Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B86F6F1A139324ECD9CB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1730.54

Transaction ID : B10E232B2A03B4389B9E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BRABENDERCOX, LLC**

Mailing Address 1218 GRANDVIEW AVE

City  
PITTSBURGHState  
PAZip Code  
15211-1239Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

554.60

Transaction ID : B0174A8B3B1A9431B9E2

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2785.14

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 107 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

475.86

Transaction ID : BF7AEAEF8903D48CAACC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-9901Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BA21787861A954536977

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-9901Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : B22663BB481244E338B4

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

540.86

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 108 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

141.06

Transaction ID : B8A72FE8A83A0422384E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VERGNETTI, LEO, P., MR.,**

Mailing Address 519 ARTHUR AVE

City  
SCRANTONState  
PAZip Code  
18510-2356Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B4A3528DBBD6D44968B6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. COSTA, TIMOTHY, , ,**

Mailing Address 1000 NEW JERSEY AVE SE

City  
WASHINGTONState  
DCZip Code  
20003-3312Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : BAEDBAB08EC2F4090AE6

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4141.06

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 109 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DATTE, EVELYN, , ,**

Mailing Address 1650 HOWARD AVE

City  
POTTSVILLEState  
PAZip Code  
17901-3218Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B38408E462E1A46AAABF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRACY ENGINE LLC**

Mailing Address 416 FLORIDA AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-9901Purpose of Disbursement  
PROCESSING FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : BBF3F7ED7AA014ACC888

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

201.77

Transaction ID : B4D53AC5E67A44B03835

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1401.77

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 110 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LW GROUP PRINTING**

Mailing Address 97 N MAIN ST

City  
SPRING CITYState  
PAZip Code  
19475-1816Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

100.70

Transaction ID : B5FD044C2222A46F0AC2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LW GROUP PRINTING**

Mailing Address 97 N MAIN ST

City  
SPRING CITYState  
PAZip Code  
19475-1816Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

100.70

Transaction ID : BB5545A17AF7340C4BD3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUGHLIN AVENUE

City  
MC LEANState  
VAZip Code  
22101-5709Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : B4882CEC239EA46D59A2

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

236.40

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 111 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. HINE RESTAURANT**

Mailing Address 300 7TH ST SE

City  
WASHINGTONState  
DCZip Code  
20003-2504Purpose of Disbursement  
EVENT FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1618.75

Transaction ID : B4A3774D674D7406E942

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22209-2517Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

63.23

Transaction ID : BF45B291A51A54233858

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MEUSER, DANIEL, , ,**

Mailing Address 573 CARVERTON RD

City  
WYOMINGState  
PAZip Code  
18644-9373Purpose of Disbursement  
EXPENSE REIMBURSEMENT

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

520.41

Transaction ID : B8EFD0D8058F34C2D913

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2202.39

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 112 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ENTERPRISE RENT-A-CAR**

Mailing Address 10121 GLASGOW PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

City  
LOS ANGELESState  
CAZip Code  
90045-5977

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

520.41

Transaction ID : BD798D09E71964F16A16

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. NORCE, NICK, , ,**

Mailing Address 203 CHURCH RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

City  
NESCOPECKState  
PAZip Code  
18635-1860

FEC Identification Number

**C**Purpose of Disbursement  
EXPENSE REIMBURSEMENT

001

Amount of Each Disbursement this Period

637.22

Transaction ID : B1C42AD7CB7D2476783F

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2025

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

32.66

Transaction ID : B0D97161BEE9A4203BE8

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

637.22

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 113 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

34.50

Transaction ID : B4C764E655BCB443BBEB

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	0		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

28.33

Transaction ID : B6A4D2C8E2172466FA3B

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

34.33

Transaction ID : B2B8598C0E7264BB0BE0

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 114 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2025

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Category/  
Type

Amount of Each Disbursement this Period

30.69

Transaction ID : B9E5BD2FEA3C54C6C8D6

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2025

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Category/  
Type

Amount of Each Disbursement this Period

31.59

Transaction ID : B02E0C3D7ED0A4879812

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2025

City  
WASHINGTONState  
DCZip Code  
20003-1801

FEC Identification Number

**C**Purpose of Disbursement  
FOOD AND BEVERAGE

001

Category/  
Type

Amount of Each Disbursement this Period

55.47

Transaction ID : BF2EBCD73B199401CB2F

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 115 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

66.32

Transaction ID : BE12C4AB9F4324BBB9B0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30.43

Transaction ID : B9798E34E489642DFBBD

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

City  
WASHINGTONState  
DCZip Code  
20003-3385Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

43.17

Transaction ID : BD6CC3BAC0FF24247A2B

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 116 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2025

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

21.09

Transaction ID : BD0BAA531FCB8458E860

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2025

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

44.88

Transaction ID : B29D2B5F336C3489FA54

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

39.33

Transaction ID : B2F16683D2833434EF98B

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 117 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2025

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

37.79

Transaction ID : B8A463E87BA094B558BE

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2025

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

31.36

Transaction ID : B81B4CEEE9234411F8C8

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. AC HOTEL**

Mailing Address 867 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2025

City  
WASHINGTONState  
DCZip Code  
20003-3385

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

30.99

Transaction ID : B9EA6C4EC434F48F8991

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 118 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MEUSER, DANIEL, , ,**

Mailing Address 573 CARVERTON RD

City  
WYOMINGState  
PAZip Code  
18644-9373Purpose of Disbursement  
EXPENSE REIMBURSEMENT

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

8145.97

Transaction ID : B2D4E398035B941E8BEB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RITZ CARLTON**

Mailing Address 455 GRAND BAY DR

City  
KEY BISCAYNEState  
FLZip Code  
33149-1900Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3373.64

Transaction ID : B459AC2A58F474F479C0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DEER VALLEY RESORT**

Mailing Address 2250 DEER VALLEY DR S

City  
PARK CITYState  
UTZip Code  
84060Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

164.59

Transaction ID : B347C48ADA6B5427F9E3

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8145.97

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 119 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. STATE LIQUOR STORE**

Mailing Address 460 SWEDE ALLEY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2025

City  
PARK CITYState  
UTZip Code  
84060-4900

FEC Identification Number

**C**Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

263.76

Transaction ID : B5DB9F8D851ED4775880

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. DEER VALLEY RESORT**

Mailing Address 2250 DEER VALLEY DR S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2025

City  
PARK CITYState  
UTZip Code  
84060

FEC Identification Number

**C**Purpose of Disbursement  
LODGING

001

Amount of Each Disbursement this Period

2083.38

Transaction ID : B0D84534E82D241A786E

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. DEER VALLEY RESORT**

Mailing Address 2250 DEER VALLEY DR S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

City  
PARK CITYState  
UTZip Code  
84060

FEC Identification Number

**C**Purpose of Disbursement  
LODGING

001

Amount of Each Disbursement this Period

2260.60

Transaction ID : BD0ECB308C35F4F9CA31

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 120 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address PO BOX 96001

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

City  
LOS ANGELESState  
CAZip Code  
90096-8000

FEC Identification Number

**C**Purpose of Disbursement  
CREDIT CARD PAYMENT

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10572.74

Transaction ID : BD52CE63E23FE41FB99E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. FACEBOOK**

Mailing Address 1 META WY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	2	5

City  
MENLO PARKState  
CAZip Code  
94025-1444

FEC Identification Number

**C**Purpose of Disbursement  
DIGITAL ADS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10572.74

Transaction ID : BE8AFCCA9D7B24D95897

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	5

City  
WEST CHESTERState  
PAZip Code  
19382-6413

FEC Identification Number

**C**Purpose of Disbursement  
FUNDRAISING CONSULTING AND EXPENSE REIMBURSEMENT

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2896.64

Transaction ID : B9B7DACBBC4694675A0B

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

13469.38

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 121 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FRONTIER AIRLINES**

Mailing Address 4545 AIRPORT WAY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

City  
DENVERState  
COZip Code  
80239-5716

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

265.96

Transaction ID : B918BAB40FE0B4778BB5

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

City  
WEST CHESTERState  
PAZip Code  
19382-6413

FEC Identification Number

**C**Purpose of Disbursement  
MILEAGE

001

Amount of Each Disbursement this Period

34.00

Transaction ID : B5907C8A3BB0142AE998

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. MAR-A-LAGO CLUB LLC**

Mailing Address 1100 S OCEAN BLVD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

City  
PALM BEACHState  
FLZip Code  
33480-5004

FEC Identification Number

**C**Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

214.00

Transaction ID : BFE2083EFC9DD429B9CC

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

52.94

Transaction ID : BBCBC911049274FB2836

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE SEAGATE**

Mailing Address 401 S OCEAN BLVD

City  
DELRAY BEACHState  
FLZip Code  
33483-6757Purpose of Disbursement  
LODGING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1398.94

Transaction ID : B0E30D6B839074A819D1

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

City  
WEST CHESTERState  
PAZip Code  
19382-6413Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

14.00

Transaction ID : B8E85DC5C376A449FAB2

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

City  
WEST CHESTERState  
PAZip Code  
19382-6413Purpose of Disbursement  
MILEAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

99.00

Transaction ID : B6310DAA0BA4E4C32908

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DIESEL, MARIA, I., ,**

Mailing Address 980 VALLEY DR

City  
WEST CHESTERState  
PAZip Code  
19382-6413Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B4D6E7E455DDD477FA4D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. NORCE, NICK, , ,**

Mailing Address 203 CHURCH RD

City  
NESCOPECKState  
PAZip Code  
18635-1860Purpose of Disbursement  
EXPENSE REIMBURSEMENT

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

476.13

Transaction ID : BFA2169BF517E412CB83

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

476.13

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 124 OF 137

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

42.65

Transaction ID : BFFD4C085F07A458684C

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. EZ PASS**

Mailing Address 300 E PARK DR

City  
HARRISBURGState  
PAZip Code  
17111-2729Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

286.25

Transaction ID : BAD503684E81C40F4A5A

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**Mailing Address 1455 MARKET ST  
STE 400City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

72.23

Transaction ID : BBA227719B18B474DB5A

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

**TOTAL** This Period (last page this line number only).....▶

193888.32

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC**

Mailing Address 251 H ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		20		2025

City  
WASHINGTONState  
DCZip Code  
20001-2604

FEC Identification Number

**C** C00797670Purpose of Disbursement  
REFUND: EVENT SITE RENTAL

010

Amount of Each Disbursement this Period

150.00

Transaction ID : B63F03A7DA9A5476A99E

☐ Memo ItemCandidate Name  
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PACCategory/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

150.00

**TOTAL** This Period (last page this line number only).....▶

150.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 126 OF 137

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LYCOMING COUNTY VISITORS BUREAU**

Mailing Address 102 W 4TH ST

City  
WILLIAMSPORTState  
PAZip Code  
17701-6061Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : BADA E2557461D4B38A9F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO ELECT WALTER GRIFFITH**

Mailing Address 348 HIGHLAND AVE

City  
TRUCKSVILLEState  
PAZip Code  
18708-9673Purpose of Disbursement  
STATE POLITICAL CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B573126E9927D4181ABB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN COMMITTEE OF LANCASTER COUNTY**

Mailing Address 2260 ERIN CT

City  
LANCASTERState  
PAZip Code  
17601-1965Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B0C5297B2C7A0470FBD3

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1100.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 127 OF 137

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MOURNING MOTHERS OF HIP HOP INC**

Mailing Address 1750 S RINGGOLD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

City  
PHILADELPHIAState  
PAZip Code  
19145-1809

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : BD45DEA97982A4EC7951

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. LYCOMING COUNTY VISITORS BUREAU**

Mailing Address 102 W 4TH ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

City  
WILLIAMSPORTState  
PAZip Code  
17701-6061

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B42F8E862BA644C91A84

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. WHERE AMERICA STARTED**

Mailing Address 369 POTTSVILLE ST CLAIR HWY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	5

City  
POTTSVILLEState  
PAZip Code  
17901

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B1422FA1E3EB54868B2B

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SCHUYLKILL CHAMBER OF COMMERCE**Mailing Address 1 PROGRESS CIRCLE  
SUITE 201City  
POTTSVILLEState  
PAZip Code  
17901-3085Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : BEF034CB5B0A64CA8AE7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HAWK MOUNTAIN COUNCIL, BSA**

Mailing Address 5027 POTTSVILLE PIKE

City  
READINGState  
PAZip Code  
19605-9516Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B9B907FD16BAD4B44A05

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RCAC**

Mailing Address P.O. BOX 23156

City  
PITTSBURGHState  
PAZip Code  
15222-6156Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B960BE232361F47E7A15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6350.00

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 129 OF 137

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BOY SCOUTS OF AMERICA**

Mailing Address PO BOX 152079

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

City  
IRVINGState  
TXZip Code  
75015-2079

FEC Identification Number

**C**Purpose of Disbursement  
DONATIONS

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

358.18

Transaction ID : B496917C20A9E4850BA1

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. LEBANON COUNTY REPUBLICAN COMMITTEE**

Mailing Address 21 S. 9TH STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	5

City  
LEBANONState  
PAZip Code  
17042-5104

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1200.00

Transaction ID : BFBB289DF8DBA40D5B4C

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. WESTMORELAND COUNTY REPUBLICAN COMMITTEE**

Mailing Address 23 N MAPLE AVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

City  
GREENSBURGState  
PAZip Code  
15601-2503

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

300.00

Transaction ID : BC AA48D834DE3482F85E

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

1858.18

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 130 OF 137

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN MAIN STREET PARTNERSHIP**

Mailing Address 410 1ST ST SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20003-1819

FEC Identification Number

**C**Purpose of Disbursement  
DONATIONS

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

555.00

Transaction ID : BDEBA67F9DE164261A8E

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. BMPA FUND OF THE LUZERNE FOUNDATION**

Mailing Address PO BOX 1731

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	5

City  
SHAVERTOWNState  
PAZip Code  
18708-0731

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B052B833A117340FB852

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. RALLY AT THE ROCK**

Mailing Address 1167 RED ROCK RD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

City  
WYSOXState  
PAZip Code  
18854-7916

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : B4DAB3846AC924AD9814

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

4055.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 131 OF 137

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAMP FREEDOM**

Mailing Address 284 NUMBER 7 RD

City  
CARBONDALEState  
PAZip Code  
18407-1404Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B20DAD2B0293346B5AC7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SUSQUEHANNA COUNTY REPUBLICAN WOMEN**

Mailing Address 284 VOSH HILL RD

City  
MONTROSEState  
PAZip Code  
18801-6799Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : BB8D741A550314EA895E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN MAIN STREET PARTNERSHIP**

Mailing Address 410 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1819Purpose of Disbursement  
DONATIONS

012

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

825.00

Transaction ID : B88F32BBF2E564C4AB1E

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1575.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BUCKS COUNTY REPUBLICAN COMMITTEE**

Mailing Address 115 N BROAD ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2025

City  
DOYLESTOWNState  
PAZip Code  
18901-3748

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : B7B99F471ED574C93B57

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JAMIE BARTON**

Mailing Address 40 WALNUT DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2025

City  
FRACKVILLEState  
PAZip Code  
17931

FEC Identification Number

**C**Purpose of Disbursement  
CONTRIBUTION TO STATE CANDIDATE

011

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : BF3A167006F84488B9F1

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. MONROE VICTORY FUND**

Mailing Address 72 IROQUOIS RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		11		2025

City  
ALBRIGHTSVILLEState  
PAZip Code  
18210-4002

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B3C195DDC3561499F991

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

1750.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. JAMES HAYES FOR CONGRESS**

Mailing Address PO BOX 110157

City  
PITTSBURGHState  
PAZip Code  
15232-0657Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
HAYES, JAMES, DR., ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	5

FEC Identification Number

**C** C00838185

Amount of Each Disbursement this Period

1000.00

Transaction ID : BDE95C68963F342E2820

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF GREG ROTHMAN**

Mailing Address PO BOX 412

City  
HARRISBURGState  
PAZip Code  
17108-0412Purpose of Disbursement  
STATE POLITICAL CONTRIBUTION

011

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	2	5

FEC Identification Number

**C**

Amount of Each Disbursement this Period

1000.00

Transaction ID : B576995CEC9664627B3B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. REPUBLICAN PARTY OF PENNSYLVANIA**

Mailing Address 3501 NORTH FRONT STREET

City  
HARRISBURGState  
PAZip Code  
17110Purpose of Disbursement  
PARTY CONTRIBUTION

011

Candidate Name  
REPUBLICAN PARTY OF PENNSYLVANIACategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

**C** C00044842

Amount of Each Disbursement this Period

5000.00

Transaction ID : BDC740B5535904FD8808

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

7000.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 137

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MEUSER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PLUM BORO REPUBLICAN COMMITTEE**

Mailing Address 5040 HIALEAH DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	5

City  
PITTSBURGHState  
PAZip Code  
15239-2135

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Amount of Each Disbursement this Period

500.00

Transaction ID : BBDF18F2981E84C5E925

☐ Memo ItemCandidate Name  
PLUM BORO REPUBLICAN COMMITTEECategory/  
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. WALSH FOR PA**

Mailing Address PO BOX 133

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	5

City  
SWEET VALLEYState  
PAZip Code  
18656-0133

FEC Identification Number

**C**Purpose of Disbursement  
STATE POLITICAL CONTRIBUTION

011

Amount of Each Disbursement this Period

1600.00

Transaction ID : BD77C05D0493E4A47BCC

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. COMMITTEE TO ELECT DAN LAUGHLIN**

Mailing Address 3208 PEACH ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	2	5

City  
ERIEState  
PAZip Code  
16508-2736

FEC Identification Number

**C**Purpose of Disbursement  
POLITICAL CONTRIBUTION TO STATE CANDIDATE

011

Amount of Each Disbursement this Period

500.00

Transaction ID : BD380B73D86734EC498E

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

2600.00

**TOTAL** This Period (last page this line number only).....▶

28788.18

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 135 OF 137

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C4B82C520DB5E4899A98

MEUSER FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

☐ Primary☒ General☐ Other (specify) ▼

MEUSER, DANIEL, , ,

Mailing Address

573 CARVERTON RD

City

WYOMING

State

PA

ZIP Code

18644-9373

☒ Personal Funds of the Candidate

Original Amount of Loan

150000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

150000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 30 / 2018M M / D D / Y Y Y Y  
NONE

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

150000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 136 OF 137

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C620A182EAF60463D8D9

MEUSER FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

☐ Primary☒ General☐ Other (specify) ▼

MEUSER, DANIEL, , ,

Mailing Address

573 CARVERTON RD

City

WYOMING

State

PA

ZIP Code

18644-9373

☒ Personal Funds of the Candidate

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
10 19 / 2018M M / D D / Y Y Y Y  
NONE

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

15000.00

**TOTALS** This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 137 OF 137

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : CEF195EC073BF4A2DB10

MEUSER FOR CONGRESS

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2018

☐ Primary☒ General☐ Other (specify) ▼

MEUSER, DANIEL, , ,

Mailing Address

573 CARVERTON RD

City

WYOMING

State

PA

ZIP Code

18644-9373

☒ Personal Funds of the Candidate

Original Amount of Loan

90000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

85000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
06 / 01 / 2018

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

85000.00

**TOTALS** This Period (last page in this line only).....▶

250000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.