

**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

SHOEMAKER 4 CONGRESS

ADDRESS (number and street)

321 W LODI AVE



Check if different than previously reported. (ACC)

LODI

CA

95240

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00902221

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

CA

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

07 / 01 / 2025

through

M M / D D / Y Y Y Y

09 / 30 / 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 KIGER, ROBERT, , ,

Signature of Treasurer

KIGER, ROBERT, , ,

Date

M M / D D / Y Y Y Y

10 / 14 / 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

SHOEMAKER 4 CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
09 / 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))....	14303.46	21156.36
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	14303.46	21156.36
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	13229.22	18791.30
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	13229.22	18791.30
8. Cash on Hand at Close of Reporting Period (from Line 27)	2390.06	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	11040.94	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

SHOEMAKER 4 CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2025

To:

MM / DD / YYYY
09 / 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).....

12519.38

19172.28

(ii) Unitemized.....

1784.08

1984.08

(iii) TOTAL of contributions
from individuals ▶

14303.46

21156.36

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

(d) The Candidate.....

0.00

0.00

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

14303.46

21156.36

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

25.00

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

0.00

25.00

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

0.00

0.00

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

0.00

0.00

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

14303.46

21181.36

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.....	13229.22	18791.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	13229.22	18791.30

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1315.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	14303.46
25. SUBTOTAL (add Line 23 and Line 24).....	15619.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	13229.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2390.06

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 5 OF 16

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

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)

SHOEMAKER 4 CONGRESS

Full Name (Last, First, Middle Initial)

Amador, Antonio, , ,

A.

Mailing Address 1048 Vienna Dr

City

Lodi

State

CA

Zip Code

95242

FEC ID number of contributing
federal political committee.

C

Name of Employer

Amador & ASSOCIATES Realty

Occupation

Preident/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 Y
09 25 2025

Transaction ID : SA11AI.4261

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

Augustyn, Gretchen, , ,

B.

Mailing Address 3116 N Rockmont Ave

City

Claremont

State

CA

Zip Code

91711

FEC ID number of contributing
federal political committee.

C

Name of Employer

Natural History Museum

Occupation

Director and Curato

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 17 2025

Transaction ID : SA11AI.4258

Amount of Each Receipt this Period

300.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

Beck, Elaine, , ,

C.

Mailing Address 66217 E Peregrine Pl

City

Tucson

State

AZ

Zip Code

85739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Proverbs Media Group

Occupation

Founder/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 Y Y
07 10 2025

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Individual Contribution

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

4800.00

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

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

PAGE 6 OF 16

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

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NAME OF COMMITTEE (In Full)

SHOEMAKER 4 CONGRESS

Full Name (Last, First, Middle Initial)

Beck, Elaine, , ,

A.

Mailing Address 66217 E Peregrine Pl

City

Tucson

State

AZ

Zip Code

85739

FEC ID number of contributing
federal political committee.

C

Name of Employer
Proverbs Media GroupOccupation
Founder/CEO

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

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

Transaction ID : SA11AI.4172

Amount of Each Receipt this Period

2000.00

☐ Memo Item
Individual Contribution

Full Name (Last, First, Middle Initial)

Berger, Matthew, , ,

B.

Mailing Address 340 Montage Mountain Rd

City

Moosic

State

PA

Zip Code

18507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Matthew Adam BergerOccupation
Md

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	2	5

Transaction ID : SA11AI.4180

Amount of Each Receipt this Period

260.73

☐ Memo Item
Individual Contribution

Full Name (Last, First, Middle Initial)

Corradi, Allen, , ,

C.

Mailing Address 11 N AVENA AVE

City

Lodi

State

CA

Zip Code

95240

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

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	9		1	9		2	0	2	5

Transaction ID : SA11AI.4246

Amount of Each Receipt this Period

1500.00

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

3760.73

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)

SHOEMAKER 4 CONGRESS

Full Name (Last, First, Middle Initial)

Scott, Dorrothy, R., ,

A.

Mailing Address 5105 Sebreeze Way

City

Oxnard

State

CA

Zip Code

93035

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 02 2025

Transaction ID : SA11AI.4215

Amount of Each Receipt this Period

250.00

☐ Memo Item
Individual Contribution

Full Name (Last, First, Middle Initial)

Speier, Laurel, , ,

B.

Mailing Address 9014 Folkstover Ct

City

Elk Grove

State

CA

Zip Code

95624

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 Y
08 02 2025

Transaction ID : SA11AI.4190

Amount of Each Receipt this Period

3500.00

☐ Memo Item
Individual Contribution

Full Name (Last, First, Middle Initial)

Van Lith, Karl, , ,

C.

Mailing Address 2138 Gerber Dr

City

Stockton

State

CA

Zip Code

95209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwind

Occupation

Security Escort/Real Estate Agent

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 28 2025

Transaction ID : SA11AI.4178

Amount of Each Receipt this Period

208.65

☐ Memo Item
Individual Contribution

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

3958.65

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

12519.38

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

PAGE 8 OF 16

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

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NAME OF COMMITTEE (In Full)

SHOEMAKER 4 CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO Box 10689

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2025

City
CITY OF INDUSTRYState
CAZip Code
91716

FEC Identification Number

C C00902221

Purpose of Disbursement
Refund From Rype TV

001

Amount of Each Disbursement this Period

199.00

Transaction ID : SB17.4324

☐ Memo ItemCandidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO Box 10689

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2025

City
CITY OF INDUSTRYState
CAZip Code
91716

FEC Identification Number

C C00902221

Purpose of Disbursement
Payment on Account

001

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4221

☐ Memo ItemCandidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO Box 10689

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2025

City
CITY OF INDUSTRYState
CAZip Code
91716

FEC Identification Number

C C00902221

Purpose of Disbursement
Payment on Account

001

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.4326

☐ Memo ItemCandidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

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

7199.00

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

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

PAGE 9 OF 16

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

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NAME OF COMMITTEE (In Full)

SHOEMAKER 4 CONGRESS

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1920 McKinney Ave
7th floorCity
DallasState
TXZip Code
75206Purpose of Disbursement
Processing Fees

003

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	2	5

FEC Identification Number

C C00902221

Amount of Each Disbursement this Period

429.26

Transaction ID : SB17.4213

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citi Capture

Mailing Address 6556 MOSSVIEW WEST

City
CitrusState
CAZip Code
95621Purpose of Disbursement
Political Strategy Consulting/Credit Card Payment

001

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	2	5

FEC Identification Number

C C00902221

Amount of Each Disbursement this Period

2250.00

Transaction ID : SB17.4315

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Corradi, Allen, , ,

Mailing Address 11 N AVENA AVE

City
LodiState
CAZip Code
95240Purpose of Disbursement
Campaign Event

007

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	2	5

FEC Identification Number

C C00902221

Amount of Each Disbursement this Period

3256.80

Transaction ID : SB17.4268

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

3686.06

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

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

PAGE 10 OF 16

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

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NAME OF COMMITTEE (In Full)

SHOEMAKER 4 CONGRESS

Full Name (Last, First, Middle Initial)

A. FEC Infusion LLC

Mailing Address PO Box 3495

Date of Disbursement

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

City
Palm BeachState
FLZip Code
33480

FEC Identification Number

C C00902221Purpose of Disbursement
Reporting & Compliance

001

Amount of Each Disbursement this Period

1283.75

Transaction ID : SB17.4225

☐ Memo ItemCandidate Name
SHOEMAKER 4 CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 09

Full Name (Last, First, Middle Initial)

B. FEC Infusion LLC

Mailing Address PO Box 3495

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	2	5

City
Palm BeachState
FLZip Code
33480

FEC Identification Number

C C00902221Purpose of Disbursement
Reporting & Compliance

001

Amount of Each Disbursement this Period

954.75

Transaction ID : SB17.4260

☐ Memo ItemCandidate Name
SHOEMAKER 4 CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 09

Full Name (Last, First, Middle Initial)

C. GoDaddy

Mailing Address 2155 EAST GODADDY WAY

Date of Disbursement

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

City
TempeState
AZZip Code
85284

FEC Identification Number

C C00902221Purpose of Disbursement
Web Domain/Credit Card Payment

001

Amount of Each Disbursement this Period

395.64

Transaction ID : SB17.4286

☒ Memo ItemCandidate Name
SHOEMAKER 4 CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 09

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

2238.50

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

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

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

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NAME OF COMMITTEE (In Full)

SHOEMAKER 4 CONGRESS

Full Name (Last, First, Middle Initial)

A. GoDaddy

Mailing Address 2155 EAST GODADDY WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		19		2025

City
TempeState
AZZip Code
85284

FEC Identification Number

C	C00902221
---	-----------

Purpose of Disbursement
Web Domain/Credit Card Payment

001

Amount of Each Disbursement this Period

239.76

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Transaction ID : SB17.4278

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. McShane LLC

Mailing Address 7975 W. Badura Ave #1000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2025

City
Las VegasState
NVZip Code
89113

FEC Identification Number

C	C00902221
---	-----------

Purpose of Disbursement
Political Strategy Consulting/Credit Card Payment

001

Amount of Each Disbursement this Period

680.00

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Transaction ID : SB17.4288

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. McShane LLC

Mailing Address 7975 W. Badura Ave #1000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2025

City
Las VegasState
NVZip Code
89113

FEC Identification Number

C	C00902221
---	-----------

Purpose of Disbursement
Political Strategy Consulting/Credit Card Payment

001

Amount of Each Disbursement this Period

1000.00

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Transaction ID : SB17.4294

☒ 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 DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 16

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

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)

SHOEMAKER 4 CONGRESS

Full Name (Last, First, Middle Initial)

A. McShane LLC

Mailing Address 7975 W. Badura Ave #1000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2025

City
Las VegasState
NVZip Code
89113Purpose of Disbursement
Political Strategy Consulting/Credit Card Payment

001

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

FEC Identification Number

C C00902221

Amount of Each Disbursement this Period

114.11

Transaction ID : SB17.4283

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. McShane LLC

Mailing Address 7975 W. Badura Ave #1000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2025

City
Las VegasState
NVZip Code
89113Purpose of Disbursement
Political Strategy Consulting/Credit Card Payment

001

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

FEC Identification Number

C C00902221

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4311

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. McShane LLC

Mailing Address 7975 W. Badura Ave #1000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2025

City
Las VegasState
NVZip Code
89113Purpose of Disbursement
Political Strategy Consulting/Credit Card Payment

001

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

FEC Identification Number

C C00902221

Amount of Each Disbursement this Period

1014.11

Transaction ID : SB17.4312

☒ 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 DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

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

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NAME OF COMMITTEE (In Full)

SHOEMAKER 4 CONGRESS

Full Name (Last, First, Middle Initial)

A. McShane LLC

Mailing Address 7975 W. Badura Ave #1000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		18		2025

City
Las VegasState
NVZip Code
89113

FEC Identification Number

C	C00902221
---	-----------

Purpose of Disbursement
Political Strategy Consulting/Credit Card Payment

001

Amount of Each Disbursement this Period

1180.00

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Transaction ID : SB17.4313

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. McShane LLC

Mailing Address 7975 W. Badura Ave #1000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2025

City
Las VegasState
NVZip Code
89113

FEC Identification Number

C	C00902221
---	-----------

Purpose of Disbursement
Political Strategy Consulting/Credit Card Payment

001

Amount of Each Disbursement this Period

1680.00

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Transaction ID : SB17.4314

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 2415 WEST KETTLEMAN LN

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2025

City
LodiState
CAZip Code
95242

FEC Identification Number

C	C00902221
---	-----------

Purpose of Disbursement
Campaign Expense/Office Suplies/Credit Card Payment

001

Amount of Each Disbursement this Period

243.02

Candidate Name
SHOEMAKER 4 CONGRESSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Transaction ID : SB17.4276

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

0.00

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

13123.56

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 14 OF 16

FOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4099

SHOEMAKER 4 CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

KIGER, ROBERT, , ,

Mailing Address

PO Box 3495

City

Palm Beach

State

FL

ZIP Code

33480

☐ Personal Funds of the Candidate

Original Amount of Loan

25.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 05 / 2025

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).....▶

25.00

TOTALS This Period (last page in this line only).....▶

25.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 15 OF 16

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

NAME OF COMMITTEE (In Full)

SHOEMAKER 4 CONGRESS

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

AMERICAN EXPRESS

Nature of Debt (Purpose):

Campaign Expense/Travel/Credit Card Debit

Mailing Address PO Box 10689

City

CITY OF INDUSTRY

State

CA

Zip Code

91716

Outstanding Balance Beginning This Period

7000.00

Transaction ID : SD10.4124

Amount Incurred This Period

0.00

Payment This Period

7000.00

Outstanding Balance at Close of This Period

0.00

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

AMERICAN EXPRESS

Nature of Debt (Purpose):

Campaign Expense/Travel/Credit Card Debit

Mailing Address PO Box 10689

City

CITY OF INDUSTRY

State

CA

Zip Code

91716

Outstanding Balance Beginning This Period

3600.00

Transaction ID : SD10.4143

Amount Incurred This Period

0.00

Payment This Period

199.00

Outstanding Balance at Close of This Period

3401.00

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

AMERICAN EXPRESS

Nature of Debt (Purpose):

Campaign Expense/Travel/Credit Card Debit

Mailing Address PO Box 10689

City

CITY OF INDUSTRY

State

CA

Zip Code

91716

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4227

Amount Incurred This Period

4415.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

4415.08

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

7816.08

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

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

PAGE 16 OF 16

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

NAME OF COMMITTEE (In Full)

SHOEMAKER 4 CONGRESS

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

AMERICAN EXPRESS

Nature of Debt (Purpose):

Campaign Expense/Travel/Credit Card Debit

Mailing Address PO Box 10689

City

CITY OF INDUSTRY

State

CA

Zip Code

91716

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4233

Amount Incurred This Period

1771.47

Payment This Period

0.00

Outstanding Balance at Close of This Period

1771.47

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

AMERICAN EXPRESS

Nature of Debt (Purpose):

Campaign Expense/Travel/Credit Card Debit

Mailing Address PO Box 10689

City

CITY OF INDUSTRY

State

CA

Zip Code

91716

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4234

Amount Incurred This Period

1428.39

Payment This Period

0.00

Outstanding Balance at Close of This Period

1428.39

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

3199.86

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

11015.94

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

25.00

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

11040.94