

**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

FRIENDS OF MCCORMICK

ADDRESS (number and street)

PO BOX 3043

Check if different  
than previously  
reported. (ACC)

CUMMING

GA

30040

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00706747

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

GA

07

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 / 01 / 2025

through

M M / D D / Y Y Y Y  
06 / 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

DATWYLER, THOMAS, , ,

Signature of Treasurer

DATWYLER, THOMAS, , ,

Date

M M / D D / Y Y Y Y  
07 / 15 / 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

**FRIENDS OF MCCORMICK**

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)) ....	97123.00	245652.73
(b) Total Contribution Refunds (from Line 20(d)) .....	17575.00	32910.41
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	79548.00	212742.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	192025.92	448433.49
(b) Total Offsets to Operating Expenditures (from Line 14) .....	13192.47	26490.96
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	178833.45	421942.53
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	592429.41	
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) .....	0.00	

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

FRIENDS OF MCCORMICK

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).....

43465.00

89815.00

(ii) Unitemized .....

5158.00

7337.73

(iii) TOTAL of contributions  
from individuals ▶

48623.00

97152.73

(b) Political Party Committees.....

0.00

0.00

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

48500.00

148500.00

(d) The Candidate .....

0.00

0.00

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

97123.00

245652.73

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

102954.14

254678.33

## 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.) .....

13192.47

26490.96

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

9308.33

9308.33

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

222577.94

536130.35

# **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.....	192025.92	448433.49
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	24000.00	29000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	203800.00	203800.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	203800.00	203800.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	17575.00	27910.41
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	17575.00	32910.41
21. OTHER DISBURSEMENTS .....	2500.00	6026.92
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	439900.92	720170.82

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	809752.39
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	222577.94
25. SUBTOTAL (add Line 23 and Line 24).....	1032330.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	439900.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	592429.41

**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 5 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

ALMODOVAR, ANGEL, , ,

**A.**

Mailing Address 1 BELLAVISTA RD

City

HUNTSVILLE

State

AL

Zip Code

35811-2643

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTUITIVEOccupation  
CO-FOUNDER

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		2	0		2	0	2	5

Transaction ID : A6E51AC93A67541FB88F

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANBAR, ADA, , MS.,

**B.**Mailing Address 16 W ENCANTO BLVD  
UNIT 418

City

PHOENIX

State

AZ

Zip Code

85003-1198

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 ▼

400.00

Date of Receipt

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

Transaction ID : A0FAB6017A0074678AD9

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AUERBACH, LORNA, , ,

**C.**

Mailing Address 1079 AMALFI DR

City

PACIFIC PALISADES

State

CA

Zip Code

90272-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AUERBACH COMMERCIAL REALTY CO.Occupation  
PRESIDENT

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		1	3		2	0	2	5

Transaction ID : ACBADC647B18146ACB77

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REDESIGNATION FROM

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

3600.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

AUERBACH, LORNA, , ,

**A.**

Mailing Address 1079 AMALFI DR

City

PACIFIC PALISADES

State

CA

Zip Code

90272-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AUERBACH COMMERCIAL REALTY CO.

Occupation

PRESIDENT

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 13 / 2025

Transaction ID : AA6EF6D6B7C1B491FAB1

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REDESIGNATION TO

**B.**

Full Name (Last, First, Middle Initial)

AUERBACH, LORNA, , ,

Mailing Address 1079 AMALFI DR

City

PACIFIC PALISADES

State

CA

Zip Code

90272-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AUERBACH COMMERCIAL REALTY CO.

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 13 / 2025

Transaction ID : A595971D0656143A5AC1

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REATTRIBUTION FROM

**C.**

Full Name (Last, First, Middle Initial)

AUERBACH, ERNEST, , ,

Mailing Address 1079 AMALFI DR

City

PACIFIC PALISADES

State

CA

Zip Code

90272-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 13 / 2025

Transaction ID : A5B3DE474908D4682A46

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REATTRIBUTION TO

**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)

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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

AUERBACH, LORNA, , ,

**A.**

Mailing Address 1079 AMALFI DR

City

PACIFIC PALISADES

State

CA

Zip Code

90272-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AUERBACH COMMERCIAL REALTY CO.

Occupation

PRESIDENT

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		1	3		2	0	2	5

Transaction ID : A33668F86DD8D42709E8

Amount of Each Receipt this Period

7000.00

☐ 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

WASHINGTON

State

DC

Zip Code

20001-1801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15760.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	2	5

Transaction ID : A475C19AA75814388B47

Amount of Each Receipt this Period

7000.00

☒ Memo Item

INTERMEDIARY

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

Full Name (Last, First, Middle Initial)

AUERBACH, LORNA, , ,

Mailing Address 1079 AMALFI DR

City

PACIFIC PALISADES

State

CA

Zip Code

90272-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AUERBACH COMMERCIAL REALTY CO.

Occupation

PRESIDENT

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		1	3		2	0	2	5

Transaction ID : A5DFE21E2752B471C8B9

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REATTRIBUTION FROM

**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 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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

AUERBACH, ERNEST, , ,

**A.**

Mailing Address 1079 AMALFI DR

City

PACIFIC PALISADES

State

CA

Zip Code

90272-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 13 2025

Transaction ID : A0442E1D5CCD24702833

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REATTRIBUTION TO

**B.**

Full Name (Last, First, Middle Initial)

AUERBACH, LORNA, , ,

Mailing Address 1079 AMALFI DR

City

PACIFIC PALISADES

State

CA

Zip Code

90272-4029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AUERBACH COMMERCIAL REALTY CO.

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 13 2025

Transaction ID : AB3A953ED2B844725920

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

WASHINGTON

State

DC

Zip Code

20001-1801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

15760.44

Date of Receipt

M M / D D / Y Y Y Y Y  
04 13 2025

Transaction ID : A7E2D4BB12EEB40D7BAB

Amount of Each Receipt this Period

7000.00

☒ 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)..... ▶

7000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

BEAL, MARY, DEANNA, ,

**A.**Mailing Address 103 6TH ST NE  
BSMT

City

WASHINGTON

State

DC

Zip Code

20002-6019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KOUNToupES DENHAM CARR &amp; REID

Occupation

PRINCIPAL

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  
06 / 30 / 2025

Transaction ID : A8221473C059C499CAAB

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BEDLAN, BETTY, JEAN, MR.,

**B.**Mailing Address 828 22ND ST  
APT 108

City

FAIRBURY

State

NE

Zip Code

68352-1211

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 ▼

300.00

Date of Receipt

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

Transaction ID : ABD91B1D35C704BCCA71

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BLUMBERG, DAVID, , ,

**C.**

Mailing Address 415 CENTER ISLAND DR

City

NORTH MIAMI BEACH

State

FL

Zip Code

33160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLUMBERG CAPITAL

Occupation

VC

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  
04 / 04 / 2025

Transaction ID : AEF1083E4929146BBBAA

Amount of Each Receipt this Period

3500.00

☐ Memo Item

3850.00

**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)

PAGE 10 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

BOUTWELL, CANDACE, , ,

A. Mailing Address 5162 BOULDER BLUFF WAY

City  
SUWANEEState  
GAZip Code  
30024-8816FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
LAWYER

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 02 2025

Transaction ID : A55962E88689F4522B26

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BOUTWELL, CANDACE, , ,

B. Mailing Address 5162 BOULDER BLUFF WAY

City  
SUWANEEState  
GAZip Code  
30024-8816FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
LAWYER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2025

Transaction ID : AF1863EF2200647C4B40

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BOUTWELL, CANDACE, , ,

C. Mailing Address 5162 BOULDER BLUFF WAY

City  
SUWANEEState  
GAZip Code  
30024-8816FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
LAWYER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID : A578BFC28548C4ACD898

Amount of Each Receipt this Period

100.00

☐ Memo Item

300.00

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)

PAGE 11 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

BRITTON, BEATRICE, T, MRS.,

**A.**

Mailing Address PO BOX 2327

City  
SOUTH HAMILTONState  
MAZip Code  
01982-0327FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
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  
05 07 2025

Transaction ID : A91FD5B9F54974A43BA8

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BROUGHAM, WILLIAM, , ,

**B.**

Mailing Address 12674 ROUTE 59

City  
SMETHPORTState  
PAZip Code  
16749-4036FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : A9B6B19DB67AF4F2099D

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BUCHANAN MD, KEITH 'CARLTON', , ,

**C.**

Mailing Address 5335 CHELSEN WOOD DR

City  
JOHNS CREEKState  
GAZip Code  
30097-2435FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENVISION PHYSICIAN SERVICESOccupation  
PHYSICIAN

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 12 2025

Transaction ID : A1B1EBFA561B748CE88A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1200.00

**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  
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(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
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NAME OF COMMITTEE (In Full)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

CHAUHAN, HIREN, , ,

**A.** Mailing Address 605 OLD COUNTRY RDCity  
PLAINVIEWState  
NYZip Code  
11803-4901FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CYBER CONSULTING INCOccupation  
MANAGING LARTNER

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  
04 30 2025

Transaction ID : AAEAF58FE06E64BE5B5C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COLLINS, KATHERINE, C, ,

**B.** Mailing Address 1008 MALLARD POINTE DRCity  
CEDAR HILLState  
TXZip Code  
75104-8292FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

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

Transaction ID : AB253972928A642F3832

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CORCORAN, FREDERICK, , ,

**C.** Mailing Address 258 HENDRIX LNCity  
BALL GROUNDState  
GAZip Code  
30107-3836FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US ARMYOccupation  
MANAGEMENT ANALYST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 16 2025

Transaction ID : A985DF46EA75C40FDAE0

Amount of Each Receipt this Period

250.00

☐ Memo Item

750.00

**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  
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(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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

FARRAR, JANICE, , ,

**A.**

Mailing Address 287 ROCK CAMP RD

City

HUNDRED

State

WV

Zip Code

26575-8763

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 ▼

900.00

Date of Receipt

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

Transaction ID : AC938A6C6DEBE4BC5A7B

Amount of Each Receipt this Period

300.00



Memo Item

Full Name (Last, First, Middle Initial)

GANDRA, RAMANA, , ,

**B.**

Mailing Address 1610 JOHNSTOWN TRCE

City

SUWANEE

State

GA

Zip Code

30024-5446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ADEPT TECHNICAL SERVICES

Occupation

PRESIDENT CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AB8915958F6734DCE9F6

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

GENKOS, MARY, , MRS.,

**C.**

Mailing Address 1735 CLEVELAND RD

City

GLENDALE

State

CA

Zip Code

91202-1011

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 ▼

600.00

Date of Receipt

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

Transaction ID : AD477CF12164C40B1B1B

Amount of Each Receipt this Period

500.00



Memo Item

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

1050.00

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

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

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

GENKOS, MARY, , MRS.,

**A.** Mailing Address 1735 CLEVELAND RD

City

GLENDALE

State

CA

Zip Code

91202-1011

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 ▼

600.00

Date of Receipt

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

Transaction ID : A126264D9020A4E26A29

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
GENKOS, MARY, , MRS.,  
Mailing Address 1735 CLEVELAND RD

City

GLENDALE

State

CA

Zip Code

91202-1011

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 ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 15 2025

Transaction ID : A6AF71E162E3C493C86C

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
GENKOS, MARY, , MRS.,  
Mailing Address 1735 CLEVELAND RD

City

GLENDALE

State

CA

Zip Code

91202-1011

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 ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 15 2025

Transaction ID : A5D6A085AE673411B882

Amount of Each Receipt this Period

100.00

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

300.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

GENKOS, MARY, , MRS.,

**A.**

Mailing Address 1735 CLEVELAND RD

City

GLENDALE

State

CA

Zip Code

91202-1011

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 ▼

900.00

Date of Receipt

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

Transaction ID : A832449186EF643288E6

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GIBBS, TAMELA, , ,

**B.**

Mailing Address 100 CHESTNUTRIDGE DR

City

HUNTSVILLE

State

AL

Zip Code

35806-4104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WAVELINK, INC.

Occupation

OWNER, PRES/CEO

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 / 26 / 2025

Transaction ID : AC5E0CFBA75F0488B9DB

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HIGA, HELEN, , ,

**C.**

Mailing Address 2824 PARK ST

City

HONOLULU

State

HI

Zip Code

96817-1157

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : A0EFCEB6C44614DDE8E7

Amount of Each Receipt this Period

50.00

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

2650.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

KAUFMANN, BARBARA, , ,

**A.** Mailing Address 465 QUARRY HILL RDCity  
SOUTH BURLINGTONState  
VTZip Code  
05403-5895FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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 11 2025

Transaction ID : A35B66A4CB4D04ED1990

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KIRKPATRICK, MICHAEL, , MR.,

**B.** Mailing Address 315 WYNN DR NW  
STE 2City  
HUNTSVILLEState  
ALZip Code  
35805-1989FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DESE RESEARCH INCOccupation  
PRESIDENT

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 20 2025

Transaction ID : AE124F9EB6E7D4E5E8A2

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KOVACS, DIXIE, , ,

**C.** Mailing Address 621 FERN MEADOW LOOP  
APT 104City  
MIDLOTHIANState  
VAZip Code  
23114-4628FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

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

Transaction ID : A2EB5BF4325D046E6951

Amount of Each Receipt this Period

25.00

☐ Memo Item

775.00

**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  
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(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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

LEVATINO, BRIAN, , ,

**A.**

Mailing Address 611 GRAMMONT ST

City

MONROE

State

LA

Zip Code

71201-7516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GASTROENTEROLOGY CLINIC, APMC

Occupation

PHYSICIAN

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 01 2025

Transaction ID : AF148437ECBBE4E44891

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARTIN, ELLEN, W, MRS.,

**B.**

Mailing Address 4955 GLENBROOK RD NW

City

WASHINGTON

State

DC

Zip Code

20016-3222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOUSEWIFE

Occupation

SELF

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 07 2025

Transaction ID : A78923AE17E174ED1981

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCGRIFF, JEREMY, , ,

**C.**

Mailing Address 23121 INGERSOLL WAY

City

BRAMBLETON

State

VA

Zip Code

20148-7258

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PENIEL SOLUTIONS

Occupation

SALES

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  
06 10 2025

Transaction ID : A043699FFFF29446E8AC

Amount of Each Receipt this Period

250.00

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

4250.00

**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 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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

MUDUNURI, SATYANARAYANA RAJU, , ,

Mailing Address 5330 BRIERSTONE DR

City

ALPHARETTA

State

GA

Zip Code

30004-5854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PETADIGIT LLC

Occupation

BUSINESS DEVELOPMENT MANAGER

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  
05 01 2025

Transaction ID : A76798714C8BB4434A70

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MUSCARELLA, GRACE, FREED, MRS.,

Mailing Address 7024 CHEW AVE

City

PHILADELPHIA

State

PA

Zip Code

19119-1846

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

NONE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

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

Transaction ID : A1F2619115AC14E4DA06

Amount of Each Receipt this Period

450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NEELLEY, ALLEN, , ,

Mailing Address 3270 BAKER CREEK LN

City

MANHATTAN

State

MT

Zip Code

59741-8242

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  
04 11 2025

Transaction ID : A7182959A2F9A4112A08

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1200.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

PAYNE, CHRIS, W., MR.,

**A.** Mailing Address 5837 CARNOUSTIE CT

City

AVE MARIA

State

FL

Zip Code

34142-5260

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CROSS POTOMAC CONSULTINGOccupation  
CONSULTANT

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	4		0	7		2	0	2	5

Transaction ID : A6357606BBE8F416FAF9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PRICE, ED, , ,

**B.** Mailing Address

City

SAVANNAH

State

GA

Zip Code

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 ▼

500.00

Date of Receipt

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

Transaction ID : A5BBA130DE54D4CEAA0E

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PRICE, EDWARD, , ,

**C.** Mailing Address 1303 DUBLIN DR.

City

RICHMOND HILL

State

GA

Zip Code

31324-4360

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 ▼

250.00

Date of Receipt

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

Transaction ID : A005FE6B0F9BD45A89B2

Amount of Each Receipt this Period

250.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
DEMOCRACY ENGINE INC PAC**SUBTOTAL** of Receipts This Page (optional)..... ▶

1750.00

**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
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NAME OF COMMITTEE (In Full)

**FRIENDS OF MCCORMICK**

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15760.44

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 16 2025

Transaction ID : A938A0817D46C409E8AD

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

B.

Full Name (Last, First, Middle Initial)

RIVERS, CLINT, , ,

Mailing Address 4951 ROARING FORK PASS

City

SUWANEE

State

GA

Zip Code

30024-7668

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 28 2025

Transaction ID : A1F0762B955D046C6AC2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

SEABROOK, MARCH, , ,

Mailing Address 5 HEATHWOOD CIR

City

COLUMBIA

State

SC

Zip Code

29205-1938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

LEXINGTON MEDICAL

MD

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  
04 15 2025

Transaction ID : ACAA5D6355CAB40E79D8

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

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

2500.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

SHAH, SAMIR, , ,

**A.**

Mailing Address 176 PRESIDENT AVE

City

PROVIDENCE

State

RI

Zip Code

02906-4616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE MIRIAM HOSPITAL

Occupation

CHIEF OF GASTROENTEROLOGY

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  
04 / 01 / 2025

01

2025

Transaction ID : A2655C19B24AC49369E0

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SINGHANIA, ROHIT, , ,

**B.**

Mailing Address 52 CEDAR CREST LN

City

SUFFIELD

State

CT

Zip Code

06078-1248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GI ALLIANCE

Occupation

GASTROENTEROLOGY

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  
04 / 02 / 2025

02

2025

Transaction ID : A11E01F72946A46AB8CE

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SKILES, ELLIOTT, , ,

**C.**

Mailing Address 1328 S SHERWOOD DR

City

CHARLESTON

State

SC

Zip Code

29407-6679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NAVY

Occupation

NAVAL OFFICER

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  
04 / 28 / 2025

28

2025

Transaction ID : A1F498FF1C9E54DDEBCE

Amount of Each Receipt this Period

50.00

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

1050.00

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

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

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

SKILES, ELLIOTT, , ,

**A.**

Mailing Address 1328 S SHERWOOD DR

City

CHARLESTON

State

SC

Zip Code

29407-6679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NAVY

Occupation

NAVAL OFFICER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 28 2025

Transaction ID : AFC42F4BD4A824DF496E

Amount of Each Receipt this Period

50.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

SKILES, ELLIOTT, , ,

Mailing Address 1328 S SHERWOOD DR

City

CHARLESTON

State

SC

Zip Code

29407-6679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NAVY

Occupation

NAVAL OFFICER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 28 2025

Transaction ID : A76B8E902DBCD4F9ABEF

Amount of Each Receipt this Period

50.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

SMELTZER, KAREN, , ,

Mailing Address 1215 ROOT LN

City

PASO ROBLES

State

CA

Zip Code

93446-2081

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 ▼

220.00

Date of Receipt

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

Transaction ID : A69B0CDCFAA1840A886A

Amount of Each Receipt this Period

40.00



Memo Item

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

140.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

SNYDER, RICK, , DR.,

**A.**

Mailing Address 5514 YOLANDA LANE

City  
DALLASState  
TXZip Code  
75229-6440FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HEARTPLACEOccupation  
CARDIOLOGIST

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  
04 01 2025

Transaction ID : A7EE4903186F7468D99E

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STAI, DIAN, GRAVES, ,

**B.**Mailing Address 400 PINE ST  
STE 1000City  
ABILENEState  
TXZip Code  
79601-5142FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
NONE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID : A6AA7D6240A054C8DAFB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, , ,

**C.**

Mailing Address 4601 LAFAYETTE AVE

City  
FORT WORTHState  
TXZip Code  
76107-3721FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATTORNEYOccupation  
STEWART PLLC

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : A3EAF07641B2645E981C

Amount of Each Receipt this Period

50.00

☐ Memo Item

2550.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

SUNDARA, PRIYANKA, , ,

**A.**Mailing Address 555 N POINT CTR E  
STE 411

City

ALPHARETTA

State

GA

Zip Code

30022-8269

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CARVINTECH LLC

Occupation

BUSINESS OWNER

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  
04 / 29 / 2025

Transaction ID : AE230F03D10754AA3A09

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TULL, AUSTIN, , ,

**B.**

Mailing Address 2135 WESTWOOD RD SE

City

SMYRNA

State

GA

Zip Code

30080-5856

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AUSTIN TULL

Occupation

PHARMACIST

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 / 15 / 2025

Transaction ID : A4F3888EE32824F468B1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALL, STEPHEN, , ,

**C.**

Mailing Address 5121 E CONANT ST

City

LONG BEACH

State

CA

Zip Code

90808-2561

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 ▼

300.00

Date of Receipt

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

Transaction ID : A7B54C36E06FC4419B70

Amount of Each Receipt this Period

300.00

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

1550.00

43465.00

**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
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

**AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND**

Mailing Address P.O. BOX 66

City

DANIA BEACH

State

FL

Zip Code

33004-0066

FEC ID number of contributing  
federal political committee.**C** C00027532

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	6		3	0		2	0	2	5

Transaction ID : A9EA75ED1F8FE43E3A6E

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC**

Mailing Address 1061 AMERICAN LANE

City

SCHAUMBURG

State

IL

Zip Code

60173

FEC ID number of contributing  
federal political committee.**C** C00255752

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AE6C31429766E4096812

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ASSOCIATED BUILDERS AND CONTRACTORS, INC. PAC (ABC PAC)**Mailing Address 440 FIRST STREET NW  
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00010421

Name of Employer

Occupation

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		3	0		2	0	2	5

Transaction ID : AE55A9BCD3658469E8F6

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)..... ►

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 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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

**ASSOCIATED BUILDERS AND CONTRACTORS, INC. PAC (ABC PAC)****A.**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 ▼

3500.00

Date of Receipt

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

Transaction ID : A5EAF721CCAE442B7B58

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BLUE ORIGIN LLC PAC (BLUE ORIGIN PAC)****B.**

Mailing Address 21218 76TH AVE S

City  
KENTState  
WAZip Code  
98032-2442FEC ID number of contributing  
federal political committee.**C** C00557793

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  
04 15 2025

Transaction ID : A50DB0E29F2C14CCA861

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**COX ENTERPRISES PAC (COXPAC) INC.****C.**Mailing Address 975 F ST NW  
STE 300City  
WASHINGTONState  
DCZip Code  
20004-1459FEC ID number of contributing  
federal political committee.**C** C00477653

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  
05 16 2025

Transaction ID : AF85CE1F7F6E44A379C0

Amount of Each Receipt this Period

2500.00

☐ Memo Item

6000.00

**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  
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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

DELTA AIR LINES PAC

**A.**Mailing Address 601 PENNSYLVANIA AVE NW  
SUITE 700 NORTHCity  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00104802

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		1	0		2	0	2	5

Transaction ID : AC57015D664EF449B80A

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DELTA AIR LINES PAC

**B.**Mailing Address 601 PENNSYLVANIA AVE NW  
SUITE 700 NORTHCity  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00104802

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 : A11659C50CA98402E902

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GEORGIA OILMEN'S ASSOCIATION INC PAC (GOAPAC)

**C.**Mailing Address 1775 SPECTRUM DR  
STE 100City  
LAWRENCEVILLEState  
GAZip Code  
30043-7861FEC ID number of contributing  
federal political committee.**C** C00319194

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	0		2	0	2	5

Transaction ID : A0A8422EC5F724217A1B

Amount of Each Receipt this Period

1000.00

☐ 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)  
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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

HDR, INC. EMPLOYEE OWNERS PAC

Mailing Address 1917 S 67TH ST

City  
OMAHAState  
NEZip Code  
68106-2965FEC ID number of contributing  
federal political committee.

C C00103903

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 18 2025

Transaction ID : AD5FF9369F00C4AD3AC6

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE NW

City  
WASHINGTONState  
DCZip Code  
20005-4108FEC ID number of contributing  
federal political committee.

C C00238725

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  
06 30 2025

Transaction ID : A741223A2583747A38CF

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE NEMPAC

Mailing Address 4950 W ROYAL LANE

City  
IRVINGState  
TXZip Code  
75038FEC ID number of contributing  
federal political committee.

C C00140061

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  
04 15 2025

Transaction ID : AAED8EEA8FE21473390D

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  
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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

**NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE NEMPAC**

Mailing Address 4950 W ROYAL LANE

City  
IRVINGState  
TXZip Code  
75038FEC ID number of contributing  
federal political committee.**C** C00140061

Name of Employer

Occupation

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  
06 30 2025

Transaction ID : A6F30715154994B07957

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PROFESSIONAL COMPOUNDING CENTERS OF AMERICA PAC**

Mailing Address 9901 S WILCREST DR

City  
HOUSTONState  
TXZip Code  
77099-5132FEC ID number of contributing  
federal political committee.**C** C00558452

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  
05 16 2025

Transaction ID : AA5E78FE6A195432093B

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**RELX INC. PAC**Mailing Address 1150 18TH ST NW  
STE 250City  
WASHINGTONState  
DCZip Code  
20036-3820FEC ID number of contributing  
federal political committee.**C** C00345793

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  
04 29 2025

Transaction ID : A7E4B4F24CF6A46C4990

Amount of Each Receipt this Period

1500.00

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

4000.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

**REPUBLICAN GOVERNANCE GROUP/TUESDAY GROUP PAC****A.** Mailing Address 610 S BOULEVARDCity  
TAMPAState  
FLZip Code  
33606-2647FEC ID number of contributing  
federal political committee.**C** C00433060

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  
06 18 2025

Transaction ID : AE4EA3088C90348158D9

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SEAL PAC****B.** Mailing Address 824 S MILLEDGE AVE, STE 101City  
ATHENSState  
GAZip Code  
30605FEC ID number of contributing  
federal political committee.**C** C00570226

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 10 2025

Transaction ID : AB0D18D43302F4963BEF

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SOUTHERN COMPANY GAS EMPLOYEES PAC****C.** Mailing Address 10 PEACHTREE PL NECity  
ATLANTAState  
GAZip Code  
30309-4497FEC ID number of contributing  
federal political committee.**C** C00145037

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  
04 29 2025

Transaction ID : AD6336559A2C04184864

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
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

**SYNCHRONY FINANCIAL EMPLOYEES PAC (SYNCPAC)**

Mailing Address 777 LONG RIDGE RD

City  
STAMFORDState  
CTZip Code  
06902-1247FEC ID number of contributing  
federal political committee.**C** C00589119

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  
05 01 2025

Transaction ID : A48A856940A3D4C1DAC3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THE COCA-COLA COMPANY NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT**

Mailing Address 1 COCA COLA PLZ NW

City  
ATLANTAState  
GAZip Code  
30313-2420FEC ID number of contributing  
federal political committee.**C** C00012468

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID : A1483B5526A484C58884

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THE HOME DEPOT INC. PAC**Mailing Address 1155 F ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20004-1346FEC ID number of contributing  
federal political committee.**C** C00284885

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  
05 29 2025

Transaction ID : A72966EB4352A4753A7E

Amount of Each Receipt this Period

5000.00

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

8500.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

TROUTMAN PEPPER LOCKE LLP PAC, INC.

**A.**Mailing Address 600 PEACHTREE ST NE  
STE 3000City  
ATLANTAState  
GAZip Code  
30308-2305FEC ID number of contributing  
federal political committee.**C** C00311142

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
06		30		2025

Transaction ID : A79E7C71B34F74F83BFC

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

UNITED PARCEL SERVICE INC. PAC

**B.**

Mailing Address 316 PENNSYLVANIA AVE SE - STE 300

City  
WASHINGTONState  
DCZip Code  
20003FEC ID number of contributing  
federal political committee.**C** C00064766

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		27		2025

Transaction ID : A25389A0C1FC4469D9ED

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WITH HONOR PAC

**C.**

Mailing Address PO BOX 1843

City  
ALEXANDRIAState  
VAZip Code  
22313-1843FEC ID number of contributing  
federal political committee.**C** C00661272

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
06		30		2025

Transaction ID : AADFA34767F914B03A1D

Amount of Each Receipt this Period

1500.00

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

8000.00

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

48500.00

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

MCCORMICK VICTORY FUND

A.

Mailing Address PO BOX 183

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

C C00828202

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

254678.33

Date of Receipt

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

Transaction ID : A3AFD3E3E68A645A3A96

Amount of Each Receipt this Period

44651.40

☐ Memo Item

TRANSFER FROM AUTHORIZED COMMITTEE

B.

Full Name (Last, First, Middle Initial)

PORTER, JEREMY, W., ,

Mailing Address 20 DUCK THURMOND RD

City  
DAWSONVILLEState  
GAZip Code  
30534-2849FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

ATLANTA MOTORSPORTS PARKS

CEO

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 16 2025

Transaction ID : A86105212A46B4592B3B

Amount of Each Receipt this Period

3500.00

☒ Memo Item

C.

Full Name (Last, First, Middle Initial)

CHARLES, JEAN, , ,

Mailing Address PO BOX 1028

City  
ROSWELLState  
GAZip Code  
30077-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

DELTA AIR LINES

VENDOR RELATIONS SPECIALIST

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  
03 31 2025

Transaction ID : A38EED211D72A409EA4D

Amount of Each Receipt this Period

3500.00

☒ Memo Item

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

44651.40

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 34 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

CHARLES, DONALD, , ,

**A.**

Mailing Address PO BOX 1028

City

ROSWELL

State

GA

Zip Code

30077-1028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FINANCE

Occupation

ERNEST &amp; YOUNG

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : ACD7EE48FBE474793B90

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BEAMAN, LEE, , ,

**B.**

Mailing Address 5341 VIRGINIA WAY

City

BRENTWOOD

State

TN

Zip Code

37027-7531

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BEAMAN VENTURES

Occupation

INVESTOR

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : A9C6A679927E5461D8D4

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BEATY, THOMAS, F, ,

**C.**

Mailing Address 211 UPSHAW DR

City

ALPHARETTA

State

GA

Zip Code

30009-1549

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EXECUTIVE

Occupation

INSIGHT SOURCING GROUP

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3700.00

Date of Receipt

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

Transaction ID : A3842FC24E50546EAA09

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  
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(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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

STEWART, JEB, , ,

**A.** Mailing Address 2764 THURLESTON LNCity  
DULUTHState  
GAZip Code  
30097-4997FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MANAGEROccupation  
XANA MANAGEMENT

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 11 2025

Transaction ID : A71D7AF1C7FE54C9BA95

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

LAIL, SLADE, W, ,

**B.** Mailing Address PO BOX 1476City  
DULUTHState  
GAZip Code  
30096-0026FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DENTISTOccupation  
SELF

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 01 2025

Transaction ID : ABD24B4B9808D4EE7B1F

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

PATEL, RAJESH, , ,

**C.** Mailing Address 2253 GRADY RIDGE TRLCity  
DULUTHState  
GAZip Code  
30097-5249FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JMS FAMILY LPOccupation  
NA

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 18 2025

Transaction ID : AC2E55143B3D7431A929

Amount of Each Receipt this Period

3500.00

☒ 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  
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(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
<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

ELDER, DEREK, J, ,

**A.**

Mailing Address 7218 34TH ST E

City  
SARASOTAState  
FLZip Code  
34243-3366FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DERSON ADVISORSOccupation  
DERSON ADVISORS LLC

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 / 13 / 2025

Transaction ID : A6258BB6D536C4AF4809

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

ELDER, LAURA, , ,

**B.**

Mailing Address 7218 34TH ST E

City  
SARASOTAState  
FLZip Code  
34243-3366FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WEALTH ENHANCEMENTOccupation  
SENIOR VP FINANCIAL ADVISOR

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

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

Transaction ID : A5CC6758D85724DAEBC2

Amount of Each Receipt this Period

2000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

POROTKO, ZORYANA, , ,

**C.**

Mailing Address 7218 34TH ST E

City  
SARASOTAState  
FLZip Code  
34243-3366FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
ENTREPRENEUR

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 / 12 / 2025

Transaction ID : AA934C9AE4B804D2BA3D

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  
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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

BEATY, KENDRA, , ,

**A.**

Mailing Address 211 UPSHAW DR

City

ALPHARETTA

State

GA

Zip Code

30009-1549

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RESULTIVOccupation  
INVESTING

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 / 04 / 2025D D / Y Y Y Y Y  
04 / 2025Y Y Y Y Y  
2025

Transaction ID : A5A1E7ADA8E5C4E218AC

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MAGILL, ARNOLD, R, MR.,

**B.**Mailing Address 711 MATADOR LN  
APT 202

City

MESQUITE

State

TX

Zip Code

75149-8828

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 ▼

4000.00

Date of Receipt

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

Transaction ID : A3BD2232C65E3432298A

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

LACKEY, MARK, , ,

**C.**

Mailing Address 874 JAMES SPRINGS RD

City

DANIELSVILLE

State

GA

Zip Code

30633-2535

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 ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2025D D / Y Y Y Y Y  
31 / 2025Y Y Y Y Y  
2025

Transaction ID : ACADA386D795C4E3C90A

Amount of Each Receipt this Period

2000.00

☒ 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)

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<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

A. MARCUS, FREDERICK, , ,

Mailing Address PO BOX 15173

City  
ATLANTAState  
GAZip Code  
30333-0173FEC 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 Y  
03 31 2025

Transaction ID : A5A27B078C5E649C08CD

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LACKEY, ANNE, , ,

Mailing Address PO BOX 450

City  
ILAState  
GAZip Code  
30647-0450FEC 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 Y  
06 25 2025

Transaction ID : A1A02625248A04FD3BC4

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. DORMINEY, MICHAEL, , ,

Mailing Address 37 WILLS RUN DR

City  
SENOIAState  
GAZip Code  
30276-1887FEC 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 Y  
06 30 2025

Transaction ID : A794E7B4057364EAB9E1

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)

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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

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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

WATSON, ROBERT, ASHLEY, MR.,

**A.**Mailing Address 1337 W GATE DR  
APT 304City  
LELANDState  
NCZip Code  
28451-4271FEC 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  
06 30 2025

Transaction ID : A07DBBC97953249928C5

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

REICHARD, CYNTHIA, , ,

**B.**

Mailing Address 1091 LAKE DR

City  
MARIETTAState  
GAZip Code  
30066-1073FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OTHEROccupation  
EXECUTIVE VICE PRESIDENT

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 30 2025

Transaction ID : ABDE16CD55F374D5D9FB

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MCCORMICK VICTORY FUND

**C.**

Mailing Address PO BOX 183

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

C C00828202

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

254678.33

Date of Receipt

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

Transaction ID : A5025C275D13E47929C4

Amount of Each Receipt this Period

58302.74

☐ Memo Item

TRANSFER FROM AUTHORIZED COMMITTEE

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

58302.74

**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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

PORTER, JEREMY, W., ,

**A.**

Mailing Address 20 DUCK THURMOND RD

City  
DAWSONVILLEState  
GAZip Code  
30534-2849FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATLANTA MOTORSPORTS PARKSOccupation  
CEO

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 / 16 / 2025

Transaction ID : A228BB2F286EC4FFDAC1

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

CHARLES, JEAN, , ,

**B.**

Mailing Address PO BOX 1028

City  
ROSWELLState  
GAZip Code  
30077-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DELTA AIR LINESOccupation  
VENDOR RELATIONS SPECIALIST

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  
03 / 31 / 2025

Transaction ID : A8556F1E4135648A6895

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

CHARLES, DONALD, , ,

**C.**

Mailing Address PO BOX 1028

City  
ROSWELLState  
GAZip Code  
30077-1028FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FINANCEOccupation  
ERNEST & YOUNG

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  
03 / 31 / 2025

Transaction ID : A28E5E68D5A9046708AB

Amount of Each Receipt this Period

3500.00

☒ 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)

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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

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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

BEAMAN, LEE, , ,

**A.** Mailing Address 5341 VIRGINIA WAYCity  
BRENTWOODState  
TNZip Code  
37027-7531FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BEAMAN VENTURESOccupation  
INVESTOR

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 05 2025

Transaction ID : ADE72B491C36A411C99F

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BEATY, THOMAS, F, ,

**B.** Mailing Address 211 UPSHAW DRCity  
ALPHARETTAState  
GAZip Code  
30009-1549FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EXECUTIVEOccupation  
INSIGHT SOURCING GROUP

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3700.00

Date of Receipt

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

Transaction ID : AB53ACB9C4E38480C8C5

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

STEWART, JEB, , ,

**C.** Mailing Address 2764 THURLESTON LNCity  
DULUTHState  
GAZip Code  
30097-4997FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MANAGEROccupation  
XANA MANAGEMENT

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 11 2025

Transaction ID : AAE0C845A12664A67BFF

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)

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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

STARR, TAKAKO, , ,

**A.** Mailing Address 134 COLOMBO AVE

City

SIERRA VISTA

State

AZ

Zip Code

85635-2306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : AC157620E1D5E40DBB02

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

LAIL, SLADE, W, ,

**B.** Mailing Address PO BOX 1476

City

DULUTH

State

GA

Zip Code

30096-0026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DENTISTOccupation  
SELF

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  
05 01 2025

Transaction ID : A247A14914ECE424CB39

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

PATEL, RAJESH, , ,

**C.** Mailing Address 2253 GRADY RIDGE TRL

City

DULUTH

State

GA

Zip Code

30097-5249

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JMS FAMILY LPOccupation  
NA

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 18 2025

Transaction ID : AE0A0B599DCAF439F8F7

Amount of Each Receipt this Period

3500.00

☒ 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)

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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

ELDER, DEREK, J, ,

**A.**

Mailing Address 7218 34TH ST E

City

SARASOTA

State

FL

Zip Code

34243-3366

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DERSON ADVISORSOccupation  
DERSON ADVISORS LLC

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	5		1	3		2	0	2	5

Transaction ID : AEF90F5B419414B23B90

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BROUGHAM, WILLIAM, , ,

**B.**

Mailing Address 12674 ROUTE 59

City

SMETHPORT

State

PA

Zip Code

16749-4036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

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

Transaction ID : AF3C1F89C7B7B40BC869

Amount of Each Receipt this Period

35.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

ELDER, LAURA, , ,

**C.**

Mailing Address 7218 34TH ST E

City

SARASOTA

State

FL

Zip Code

34243-3366

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WEALTH ENHANCEMENTOccupation  
SENIOR VP FINANCIAL ADVISOR

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	5		1	3		2	0	2	5

Transaction ID : A3E52A84FA35949CB997

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  
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(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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

WINFREE, JAMES, , ,

**A.** Mailing Address 354 BAKER STCity  
KILGOREState  
TXZip Code  
75662-0117FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TREE FARMEROccupation  
SELF

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  
03 05 2025

Transaction ID : AC6A2971F00774E37BAA

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

WINFREE, JAMES, , ,

**B.** Mailing Address 354 BAKER STCity  
KILGOREState  
TXZip Code  
75662-0117FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TREE FARMEROccupation  
SELF

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

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

Transaction ID : A20A73A3A64B8436AB63

Amount of Each Receipt this Period

300.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

POROTKO, ZORYANA, , ,

**C.** Mailing Address 7218 34TH ST ECity  
SARASOTAState  
FLZip Code  
34243-3366FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
ENTREPRENEUR

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  
05 12 2025

Transaction ID : A5820379C539F4346BFA

Amount of Each Receipt this Period

3500.00

☒ 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)

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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

BEATY, KENDRA, , ,

**A.**

Mailing Address 211 UPSHAW DR

City

ALPHARETTA

State

GA

Zip Code

30009-1549

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RESULTIVOccupation  
INVESTING

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		0	4		2	0	2	5

Transaction ID : A6575C198DC114E4FB8F

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

KITTS, NANCY, , ,

**B.**

Mailing Address 138 RICHFIELD RD

City

UPPER DARBY

State

PA

Zip Code

19082-4126

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 ▼

290.00

Date of Receipt

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

Transaction ID : A308EB028815A447E9EB

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

DOOLITTLE, MARLA, , ,

**C.**Mailing Address 666 11TH AVE  
APT 207

City

FAIRBANKS

State

AK

Zip Code

99701-4604

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 ▼

500.00

Date of Receipt

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

Transaction ID : A1B81605B751B400E981

Amount of Each Receipt this Period

200.00

☒ 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  
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(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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

LAUHOFF, VERA, , MRS.,

**A.**

Mailing Address 133 SABINE ST

City  
PORTLANDState  
TXZip Code  
78374-1453FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : A0563A4138C3A41F482A

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

VOGES, JOAN, E, MRS.,

**B.**

Mailing Address 11113 OBST RD

City  
RED BUDState  
ILZip Code  
62278-4225FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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  
03 04 2025

Transaction ID : A13B0741E286346B8925

Amount of Each Receipt this Period

300.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MAGILL, ARNOLD, R, MR.,

**C.**Mailing Address 711 MATADOR LN  
APT 202City  
MESQUITEState  
TXZip Code  
75149-8828FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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  
03 04 2025

Transaction ID : A958CC98141A3445C856

Amount of Each Receipt this Period

500.00

☒ 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)

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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

HIGA, HELEN, , ,

**A.**

Mailing Address 2824 PARK ST

City

HONOLULU

State

HI

Zip Code

96817-1157

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
0	3		0	4		2	0	2	5

Transaction ID : AFF527EC50F6E4514B04

Amount of Each Receipt this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

ONION, WILLIAM, , ,

**B.**

Mailing Address 5128 FAWN GROVE RD

City

PYLESVILLE

State

MD

Zip Code

21132-1006

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
0	3		0	4		2	0	2	5

Transaction ID : A31965619FD8C445D9F8

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

FERNANDES, F, DAN, MR.,

**C.**

Mailing Address 2201 STRATFORD WAY

City

LA VERNE

State

CA

Zip Code

91750-5143

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 ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	5

Transaction ID : AB783EE8E04E34D4D862

Amount of Each Receipt this Period

300.00

☒ 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)

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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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

WALL, IRENE, , ,

**A.** Mailing Address 119 SHAWNEE TRL

City

PRUDENVILLE

State

MI

Zip Code

48651-9727

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 ▼

1132.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2025D D / Y Y Y Y Y  
10 / 2025Y Y Y Y Y  
2025

Transaction ID : A987B558C43314C13841

Amount of Each Receipt this Period

244.00



Memo Item

Full Name (Last, First, Middle Initial)

SIBLEY, FRANK, , ,

**B.** Mailing Address 300 PADDOCK LN  
APT 3107

City

BOXBOROUGH

State

MA

Zip Code

01719-1772

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2025D D / Y Y Y Y Y  
14 / 2025Y Y Y Y Y  
2025

Transaction ID : ACB8797B95E8446F1B9F

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

COLLINS, KATHERINE, C, ,

**C.** Mailing Address 1008 MALLARD POINTE DR

City

CEDAR HILL

State

TX

Zip Code

75104-8292

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 21 / 2025D D / Y Y Y Y Y  
21 / 2025Y Y Y Y Y  
2025

Transaction ID : A8E9238309F6044DE873

Amount of Each Receipt this Period

400.00



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)

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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)

**FRIENDS OF MCCORMICK**Full Name (Last, First, Middle Initial)  
FAIRBANKS, RICHARD, W, MR.,

Mailing Address 406 OLD ORCHARD RD

City  
BALTIMOREState  
MDZip Code  
21229-2440FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
NONE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2025

Transaction ID : ABB82E17995CD45989E5

Amount of Each Receipt this Period

400.00

☒ Memo ItemFull Name (Last, First, Middle Initial)  
KOVACS, DIXIE, , ,Mailing Address 621 FERN MEADOW LOOP  
APT 104City  
MIDLOTHIANState  
VAZip Code  
23114-4628FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
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  
03 / 31 / 2025

Transaction ID : AC3708AE0504E404686E

Amount of Each Receipt this Period

75.00

☒ Memo ItemFull Name (Last, First, Middle Initial)  
MARCUS, FREDERICK, , ,

Mailing Address PO BOX 15173

City  
ATLANTAState  
GAZip Code  
30333-0173FEC 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  
03 / 31 / 2025

Transaction ID : AF761C35217244A77AE3

Amount of Each Receipt this Period

3500.00

☒ 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 50 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

HIMEL, MALCOLM, J, ,

**A.** Mailing Address 18411 KINGSTOWN CTCity  
HOUSTONState  
TXZip Code  
77058-4210FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
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  
03 31 2025

Transaction ID : A7A0F36AB8C4D491E98A

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

STAI, DIAN, GRAVES, ,

**B.** Mailing Address 400 PINE ST  
STE 1000City  
ABILENEState  
TXZip Code  
79601-5142FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
NONE

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  
04 15 2025

Transaction ID : A608D2D343E0243EAA60

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

LAUHOFF, VERA, , MRS.,

**C.** Mailing Address 133 SABINE STCity  
PORTLANDState  
TXZip Code  
78374-1453FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 24 2025

Transaction ID : AC4977DF9F8D7462286D

Amount of Each Receipt this Period

150.00

☒ 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 51 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

MAPLE, RALPH, E, MR.,

**A.** Mailing Address 5215 VALLEY BLUFF LNCity  
KATYState  
TXZip Code  
77494-2966FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
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  
05 06 2025

Transaction ID : AE6896047F5314790AF3

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MUSCARELLA, GRACE, FREED, MRS.,

**B.** Mailing Address 7024 CHEW AVECity  
PHILADELPHIAState  
PAZip Code  
19119-1846FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
NONE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 28 2025

Transaction ID : A4B6FF9E94A734D7896C

Amount of Each Receipt this Period

150.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

WALL, STEPHEN, , ,

**C.** Mailing Address 5121 E CONANT STCity  
LONG BEACHState  
CAZip Code  
90808-2561FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 28 2025

Transaction ID : A0B7B303B97EA422B8E0

Amount of Each Receipt this Period

100.00

☒ 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 52 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

HAWTHORNE, RAYMOND, , ,

**A.** Mailing Address 39 VALLEY DRCity  
ANNVILLEState  
PAZip Code  
17003-9522FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 28 2025

Transaction ID : AC0A7F572DA844F1E882

Amount of Each Receipt this Period

237.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, , ,

**B.** Mailing Address PO BOX 207City  
CHINAState  
TXZip Code  
77613-0207FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1550.00

Date of Receipt

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

Transaction ID : A9C5B0D4952C44AF8A30

Amount of Each Receipt this Period

350.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

JANSEN, RICHARD, , ,

**C.** Mailing Address 6730 SW NEHALEM LNCity  
BEAVERTONState  
ORZip Code  
97007-5141FEC 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  
05 29 2025

Transaction ID : A85C19E5E6D3E4EA6A9B

Amount of Each Receipt this Period

500.00

☒ 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 53 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

SHOEMAKER, SHIRLEY, , ,

**A.**

Mailing Address 10728 FORT ASHBY RD

City  
KEYSERState  
WVZip Code  
26726-6229FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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  
05 30 2025

Transaction ID : AE9E8D11BB51244D5A64

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

LACKEY, ANNE, , ,

**B.**

Mailing Address PO BOX 450

City  
ILAState  
GAZip Code  
30647-0450FEC 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  
06 25 2025

Transaction ID : A7E244642693541E09AA

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

WATSON, ROBERT, ASHLEY, MR.,

**C.**Mailing Address 1337 W GATE DR  
APT 304City  
LELANDState  
NCZip Code  
28451-4271FEC 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  
06 30 2025

Transaction ID : A5EE4731347B8447188E

Amount of Each Receipt this Period

3500.00

☒ 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 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

LONGO, RAFAEL, , ,

**A.**

Mailing Address 911 CALLE ROCHESTER

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

C

Name of Employer  
RETIRED PHYSICIANSOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

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

Transaction ID : ABD69D23C2AF1452E95D

Amount of Each Receipt this Period

375.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

HRIC, CYNTHIA, S, MS.,

**B.**Mailing Address 1603 CALUMET AVE  
APT 1City  
WHITINGState  
INZip Code  
46394-1227FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED TEACHEROccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : AA696DAD607D64B10AC0

Amount of Each Receipt this Period

200.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

WATERS, DON, , ,

**C.**

Mailing Address 35 ISLAND DR

City  
SAVANNAHState  
GAZip Code  
31406-5238FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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  
05 / 15 / 2025

Transaction ID : A187D947C52DE454196D

Amount of Each Receipt this Period

2500.00

☒ 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 55 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

REICHARD, CYNTHIA, , ,

**A.** Mailing Address 1091 LAKE DR

City

MARIETTA

State

GA

Zip Code

30066-1073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OTHEROccupation  
EXECUTIVE VICE PRESIDENT

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		3	0		2	0	2	5

Transaction ID : ABA360187C577448D8B8

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, , ,

**B.** Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107-3721

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATTORNEYOccupation  
STEWART PLLC

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A919EF971277E4392A2C

Amount of Each Receipt this Period

75.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BROYLES, VERNADETTE, , ,

**C.** Mailing Address 417 WEBB DR

City

NORCROSS

State

GA

Zip Code

30071-2563

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATTORNEYOccupation  
CHILD & PARENTAL RIGHTS CAMPAIGN

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		2	0		2	0	2	5

Transaction ID : AD31E9D2890CC4E95BBE

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)..... ▶

102954.14

**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 56 OF 150

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

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

CAROLYN MACHADO, MACHADO &amp; CO

**A.**

Mailing Address 6111 NEWMAN RD

City  
FAIRFAXState  
VAZip Code  
22030-5918FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4509.17

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		24		2025

Transaction ID : A85B1FCD1D4144177B51

Amount of Each Receipt this Period

4509.17

☐ Memo Item

FUNDRAISING CONSULTING REFUNDED

**B.**

Full Name (Last, First, Middle Initial)

DEMOCRACY ENGINE LLC

Mailing Address 416 FLORIDA AVE NW  
UNIT 26418City  
WASHINGTONState  
DCZip Code  
20001-0516FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : A7FB8391131224D53A0F

Amount of Each Receipt this Period

350.00

☐ Memo Item

PROCESSING FEES REFUNDED

**C.**

Full Name (Last, First, Middle Initial)

GASPER FOR GWINNETT

Mailing Address 950 CHIVENCESTER CT

City  
SUWANEEState  
GAZip Code  
30024-7659FEC ID number of contributing  
federal political committee.

C

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
04		24		2025

Transaction ID : AC800AB4295E94F83A2A

Amount of Each Receipt this Period

2000.00

☐ Memo Item

DONATION REVERSED

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

6859.17

**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 57 OF 150

<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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

PAYCHEX

**A.**

Mailing Address 1020 DISCOVERY RD

City

EAGAN

State

MN

Zip Code

55121-2095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3707.90

Date of Receipt

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

Transaction ID : A772DD2E342144E9E983

Amount of Each Receipt this Period

686.63

☐ Memo Item

PAYROLL TAXES REFUNDED

Full Name (Last, First, Middle Initial)

PAYCHEX

**B.**

Mailing Address 1020 DISCOVERY RD

City

EAGAN

State

MN

Zip Code

55121-2095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3707.90

Date of Receipt

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

Transaction ID : A246EA0267F6640609A7

Amount of Each Receipt this Period

3021.27

☐ Memo Item

PAYROLL WAGES REFUNDED

Full Name (Last, First, Middle Initial)

PAYCHEX

**C.**

Mailing Address 1020 DISCOVERY RD

City

EAGAN

State

MN

Zip Code

55121-2095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6333.30

Date of Receipt

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

Transaction ID : AE1F616E32A4D4E72948

Amount of Each Receipt this Period

2097.77

☐ Memo Item

PAYROLL WAGES REFUNDED

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

5805.67

**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 58 OF 150

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

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

PAYCHEX

**A.**

Mailing Address 1020 DISCOVERY RD

City

EAGAN

State

MN

Zip Code

55121-2095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6333.30

Date of Receipt

M M / D D / Y Y Y Y Y  
05 02 2025

Transaction ID : A54B69155787F4DECB53

Amount of Each Receipt this Period

527.63

☐ Memo Item

PAYROLL TAXES REFUNDED

**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

Amount of Each Receipt this Period

☐ Memo Item**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

Amount of Each Receipt this Period

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

527.63

13192.47

**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 59 OF 150

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

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NAME OF COMMITTEE (In Full)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

**BRANDON FOR CONGRESS NY22****A.**

Mailing Address PO BOX 3580

City  
SYRACUSEState  
NYZip Code  
13220-3580FEC ID number of contributing  
federal political committee.**C** C00806307

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
04		24		2025

Transaction ID : A9179F62C56784CAA8A7

Amount of Each Receipt this Period

2000.00

☐ Memo Item

POLITICAL CONTRIBUTION REVERSED

**B.**

Full Name (Last, First, Middle Initial)

**INTERNAL REVENUE SERVICE (IRS)**

Mailing Address PO BOX 931000

City  
LOUISVILLEState  
KYZip Code  
40293FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5308.33

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		12		2025

Transaction ID : AA811D313640449BAA04

Amount of Each Receipt this Period

5308.33

☐ Memo Item

INTEREST INCOME

**C.**

Full Name (Last, First, Middle Initial)

**JOHNSON LEADERSHIP FUND**

Mailing Address 4710 HOPEWELL MANOR DR

City  
CUMMINGState  
GAZip Code  
30028-4033FEC ID number of contributing  
federal political committee.**C**

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
04		24		2025

Transaction ID : A8D06F63152D04E03802

Amount of Each Receipt this Period

2000.00

☐ Memo Item

POLITICAL CONTRIBUTION REVERSED

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

9308.33

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

9308.33

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
GAZip Code  
98109Purpose of Disbursement  
OFFICE SUPPLIES

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

26.70

Transaction ID : BBC1255D4E3E84830A29

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
GAZip Code  
98109Purpose of Disbursement  
OFFICE SUPPLIES

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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

54.56

Transaction ID : B5BB2D3359CA14708928

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
GAZip Code  
98109Purpose of Disbursement  
OFFICE SUPPLIES

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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

60.97

Transaction ID : BEDB483F5AF7A4FA497C

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

142.23

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
GAZip Code  
98109Purpose of Disbursement  
OFFICE SUPPLIES

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	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

24.15

Transaction ID : B57A69FC7A0534380961

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
GAZip Code  
98109Purpose of Disbursement  
OFFICE SUPPLIES

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	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21.39

Transaction ID : B9430BDFD6DF542768C6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
GAZip Code  
98109Purpose of Disbursement  
OFFICE SUPPLIES

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

53.85

Transaction ID : BA4315CBE27A84596BC3

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

99.39

**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 62 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
GAZip Code  
98109Purpose of Disbursement  
OFFICE SUPPLIES

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	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.97

Transaction ID : B58D28E4206E242138AE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address 200 VESEY STREET

City  
MANHATTANState  
NYZip Code  
10080Purpose of Disbursement  
CREDIT CARD PAYMENT

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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

17153.43

Transaction ID : B2ABF578DF7E0448488E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TRINITY PRESS**

Mailing Address 3190 REPS MILLER RDSTE 360

City  
NORCROSSState  
GAZip Code  
30071Purpose 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	4		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5018.61

Transaction ID : BAFE46B079D1E4D7FB92

☒ Memo Item

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

17167.40

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 63 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

Date of Disbursement

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

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1351

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

22.43

Transaction ID : B9F46D2EEFDA0417D9FF

☒ 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. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

Date of Disbursement

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

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-1351

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

258.92

Transaction ID : B5F8A8A01199945A7BB6

☒ 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. USPS**

Mailing Address 4575 WEBB BRG RD

Date of Disbursement

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

City  
ALPHARETTAState  
GAZip Code  
30005

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.10

Transaction ID : B9BED5CC0DADE4A32848

☒ 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 64 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. T MOBILE**

Mailing Address 12920 SE 38TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City  
BELLEVUEState  
WAZip Code  
98006-1350

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

221.49

Transaction ID : BFAF854D1FEC64871907

☒ 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. USPS**

Mailing Address 4575 WEBB BRG RD

Date of Disbursement

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

City  
ALPHARETTAState  
GAZip Code  
30005

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

20.20

Transaction ID : B8389BA35F1274594860

☒ 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. TRINITY PRESS**

Mailing Address 3190 REPS MILLER RDSTE 360

Date of Disbursement

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

City  
NORCROSSState  
GAZip Code  
30071

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTION

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

185.21

Transaction ID : BAC98D54AEF894EC9835

☒ 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 65 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address 1095 6TH AVE

Date of Disbursement

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

City  
NEW YORKState  
NYZip Code  
10036-6797Purpose of Disbursement  
UTILITIES

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:

FEC Identification Number

C

Amount of Each Disbursement this Period

148.36

Transaction ID : B88584BB4635341D4887

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

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

City  
DULUTHState  
GAZip Code  
30097Purpose 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:

FEC Identification Number

C

Amount of Each Disbursement this Period

13.66

Transaction ID : B10101695AB554A7AA22

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DELTA**

Mailing Address 1030 DELTA BLVD

Date of Disbursement

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

City  
ATLANTAState  
GAZip Code  
30354-1989Purpose 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:

FEC Identification Number

C

Amount of Each Disbursement this Period

1028.96

Transaction ID : B876BD271FA244CAB829

☒ 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 66 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DELTA**

Mailing Address 1030 DELTA BLVD

Date of Disbursement

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

City  
ATLANTAState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

331.97

Transaction ID : B5049405F55E749BEB7F

☒ 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. DELTA**

Mailing Address 1030 DELTA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2025

City  
ATLANTAState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

298.96

Transaction ID : B41BB7CBB7FF844838E1

☒ 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. PEACHTREE PKWY STORAGE**

Mailing Address 1030 PEACHTREE PKWY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2025

City  
CUMMINGState  
GAZip Code  
30041-8754

FEC Identification Number

C

Purpose of Disbursement  
STORAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

396.00

Transaction ID : B3CE7B10A7AB7472B9BF

☒ 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 67 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. HOTEL AVALON**

Mailing Address 9000 AVALON WY

City  
ALPHARETTAState  
GAZip Code  
30009-2488Purpose of Disbursement  
TRAVEL :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	4		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B3FFB81AF688D4633B24

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WHITEPAGES**

Mailing Address 2033 6TH AVE STE 1100

City  
SEATTLEWAState  
WAZip Code  
98121Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32.99

Transaction ID : BDA1F834FB386413AA39

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 1 SKYVIEW DR

City  
FORT WORTHState  
TXZip Code  
76155-1801Purpose 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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

625.48

Transaction ID : BFDD5953CB91D42CA833

☒ 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 68 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. WHITEPAGES**

Mailing Address 2033 6TH AVE STE 1100

Date of Disbursement

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

City  
SEATTLEWAState  
WAZip Code  
98121

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

22.99

Transaction ID : BEB2EB9AF53EF4C28BFB

☒ 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. THE CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20003-1801

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

636.80

Transaction ID : B24C8FF93AC2842F28C1

☒ 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. DROPBOX**Mailing Address 185 BERRY ST  
4TH FLOOR

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTION

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

90.00

Transaction ID : B697587CFBDE54CD5A83

☒ 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 69 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. TESLA INC**

Mailing Address 1 TESLA RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

City  
AUSTINState  
TXZip Code  
78725-4400

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL: TRANSPORTATION

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

240.50

Transaction ID : B9EAD7A0733454687843

☒ 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. TESLA INC**

Mailing Address 1 TESLA RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

City  
AUSTINState  
TXZip Code  
78725-4400

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL: TRANSPORTATION

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

6.51

Transaction ID : B36AAABCF0BA8424FAFC

☒ 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. TRINITY PRESS**

Mailing Address 3190 REPS MILLER RDSTE 360

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

City  
NORCROSSState  
GAZip Code  
30071

FEC Identification Number

C

Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

837.12

Transaction ID : B1E6DCB3FA9F847EE829

☒ 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 70 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. APPLE**

Mailing Address 1 INFINITE LOOP

City  
CUPERTINOState  
CAZip Code  
95014Purpose 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	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : BC057A143F503479B9A6

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE STONERIDGE GROUP (SRG)**

Mailing Address 960 NORTH PT PKWY

City  
ALPHARETTAState  
GAZip Code  
30005Purpose of Disbursement  
WEBSITE

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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.95

Transaction ID : B3ABB1D785A434D3999D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

City  
DULUTHState  
GAZip Code  
30097Purpose 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		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

16.87

Transaction ID : B5494006AB14346E4A46

☒ 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 71 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. HOTEL AVALON**

Mailing Address 9000 AVALON WY

Date of Disbursement

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

City  
ALPHARETTAState  
GAZip Code  
30009-2488

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL :LODGING

001

Amount of Each Disbursement this Period

396.18

Transaction ID : BA8025E44F1774600BC7

☒ 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. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

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

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

19.07

Transaction ID : BC4FCAF1DC635423791C

☒ 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. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

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

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

4.85

Transaction ID : B129776F4E9F345BCA6F

☒ 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 72 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-7147Purpose 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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

128.99

Transaction ID : BC75D7B9FD0F141F1B56

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-7147Purpose 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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

128.99

Transaction ID : B1BBC2FBE70CA4B4481D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606-7147Purpose 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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

397.64

Transaction ID : BCC69B9F347AD42B68A8

☒ 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 73 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. WHITEPAGES**

Mailing Address 2033 6TH AVE STE 1100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2025

City  
SEATTLEWAState  
WAZip Code  
98121

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5.99

Transaction ID : B8E8E0C503AD6468C9F0

☒ 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. AMERICAN EXPRESS**

Mailing Address 200 VESEY STREET

Date of Disbursement

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

City  
MANHATTANState  
NYZip Code  
10080

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD PAYMENT

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

7385.41

Transaction ID : B79F5D171E3D343E48CA

☐ 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. DELTA**

Mailing Address 1030 DELTA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2025

City  
ATLANTAState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

150.01

Transaction ID : B34312E3FA76A4C5BB17

☒ 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).....▶

7385.41

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2025

City  
MOUNTAIN VIEWState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

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) ▼		

Amount of Each Disbursement this Period

299.84

Transaction ID : BD23150F13E4845C39BA

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PKWY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2025

City  
MOUNTAIN VIEWState  
CAZip Code  
94043

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

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) ▼		

Amount of Each Disbursement this Period

22.45

Transaction ID : BB1ED9B4FE8C44766BFE

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 1455 MARKET ST 400-

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2025

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

C

Purpose 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) ▼		

Amount of Each Disbursement this Period

28.19

Transaction ID : B054F646142E24C63966

☒ Memo Item

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 75 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET ST 400-

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

29.40

Transaction ID : B06ACBAFE23A64E1A8D6

☒ 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. T MOBILE**

Mailing Address 12920 SE 38TH ST

Date of Disbursement

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

City  
BELLEVUEState  
WAZip Code  
98006-1350

FEC Identification Number

C

Purpose of Disbursement  
PHONE

001

Amount of Each Disbursement this Period

221.56

Transaction ID : B59DF9634F85043F384B

☒ 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. UBER**

Mailing Address 1455 MARKET ST 400-

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

6.67

Transaction ID : B88016D528AFF4362924

☒ 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 76 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET ST 400-

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose 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	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

44.48

Transaction ID : BF627785055194D22855

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET ST 400-

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose 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	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6.67

Transaction ID : B98FF3DBA26AC4BBE919

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 1455 MARKET ST 400-

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose 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	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

51.32

Transaction ID : B1D5593FA49D5445F870

☒ 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 77 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. ATLANTA AIRPORT**

Mailing Address 6033 SOUTH TERMINAL PKWY

Date of Disbursement

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

City  
ATLANTAState  
GAZip Code  
30320

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

70.00

Transaction ID : B188448933DD24DEF966

☒ 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. VERIZON WIRELESS**

Mailing Address 1095 6TH AVE

Date of Disbursement

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

City  
NEW YORKState  
NYZip Code  
10036-6797

FEC Identification Number

C

Purpose of Disbursement  
UTILITIES

001

Amount of Each Disbursement this Period

110.97

Transaction ID : BCBCBCC71D77A4A0DBB7

☒ 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. TESLA INC**

Mailing Address 1 TESLA RD

Date of Disbursement

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

City  
AUSTINState  
TXZip Code  
78725-4400

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL: TRANSPORTATION

001

Amount of Each Disbursement this Period

3.19

Transaction ID : B29A646E636D040158CB

☒ 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 78 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. WESTIN**

Mailing Address 1 RESORT DR

Date of Disbursement

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

City  
SAVANNAHState  
GAZip Code  
31421-7000

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL: LODGING

001

Amount of Each Disbursement this Period

1405.61

Transaction ID : B7CA080A9CA1244EA835

☒ 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. UBER**

Mailing Address 1455 MARKET ST 400-

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

42.49

Transaction ID : BF96842CD58254499B0D

☒ 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. HOTEL AVALON**

Mailing Address 9000 AVALON WY

Date of Disbursement

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

City  
ALPHARETTAState  
GAZip Code  
30009-2488

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL :LODGING

001

Amount of Each Disbursement this Period

3501.00

Transaction ID : B69220933737A4209BCA

☒ 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 79 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. PEACHTREE PKWY STORAGE**

Mailing Address 1030 PEACHTREE PKWY

Date of Disbursement

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

City  
CUMMINGState  
GAZip Code  
30041-8754

FEC Identification Number

C

Purpose of Disbursement  
STORAGE

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) ▼		

Amount of Each Disbursement this Period

396.00

Transaction ID : BCC75FEBBD3C74A7D8C0

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. TESLA INC**

Mailing Address 1 TESLA RD

Date of Disbursement

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

City  
AUSTINState  
TXZip Code  
78725-4400

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL: TRANSPORTATION

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) ▼		

Amount of Each Disbursement this Period

4.35

Transaction ID : BC322D29E5A9044418A8

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. WHITEPAGES**

Mailing Address 2033 6TH AVE STE 1100

Date of Disbursement

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

City  
SEATTLEWAState  
WAZip Code  
98121

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

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) ▼		

Amount of Each Disbursement this Period

32.99

Transaction ID : B26A762D7556C4F9AA11

☒ Memo Item

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 80 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. WHITEPAGES**

Mailing Address 2033 6TH AVE STE 1100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		10		2025

City  
SEATTLEWAState  
WAZip Code  
98121

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

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) ▼		

Amount of Each Disbursement this Period

22.99

Transaction ID : BB4DEE824FD4841038A3

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMAZON**

Mailing Address 410 TERRY AVE N

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2025

City  
SEATTLEState  
GAZip Code  
98109

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

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) ▼		

Amount of Each Disbursement this Period

57.21

Transaction ID : BF065DDB50A1C4742B93

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. HOUSE GIFT SHOP**

Mailing Address 701 15TH ST NW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20005-2118

FEC Identification Number

C

Purpose 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) ▼		

Amount of Each Disbursement this Period

114.25

Transaction ID : BA1DA93B3A7824C4A9CD

☒ Memo Item

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 81 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DROPBOX**Mailing Address 185 BERRY ST  
4TH FLOORCity  
SAN FRANCISCOState  
CAZip Code  
94107Purpose 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	5		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

108.00

Transaction ID : BB2B85A6EBD7643F6B78

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
GAZip Code  
98109Purpose of Disbursement  
OFFICE SUPPLIES

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

19.25

Transaction ID : B8FC0EE899A4243478D8

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. APPLE**

Mailing Address 1 INFINITE LOOP

City  
CUPERTINOState  
CAZip Code  
95014Purpose 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	5		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : B53A7A4112FA64D0BADB

☒ 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 82 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE N

City  
SEATTLEState  
GAZip Code  
98109Purpose of Disbursement  
OFFICE SUPPLIES

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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

87.17

Transaction ID : B82324DF90F094190B72

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE STONERIDGE GROUP (SRG)**

Mailing Address 960 NORTH PT PKWY

City  
ALPHARETTAState  
GAZip Code  
30005Purpose of Disbursement  
WEBSITE

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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.95

Transaction ID : B7C8A1DCC28D14D81A52

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRESH PRINTS**Mailing Address 150 W 25TH ST  
STE 501City  
NEW YORKState  
NYZip Code  
10001-7404Purpose of Disbursement  
OFFICE SUPPLIES

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

266.35

Transaction ID : BD388A141AC114339A13

☒ 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 83 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 200 VESEY STREET

City  
MANHATTANState  
NYZip Code  
10080Purpose of Disbursement  
CREDIT CARD PAYMENT

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	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

34039.80

Transaction ID : BED19EFA37832485F84B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRESH PRINTS**Mailing Address 150 W 25TH ST  
STE 501City  
NEW YORKState  
NYZip Code  
10001-7404Purpose of Disbursement  
OFFICE SUPPLIES

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

41.47

Transaction ID : B8D2D8811A65F451E952

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOUSE GIFT SHOP**

Mailing Address 701 15TH ST NW

City  
WASHINGTONState  
DCZip Code  
20005-2118Purpose 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		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.50

Transaction ID : BA402A67019FE42F1B93

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

34039.80

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. GOLD COAST TICKETS**

Mailing Address 908 W MADISON ST

City  
CHICAGOState  
ILZip Code  
60607-2633Purpose 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	5		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32500.00

Transaction ID : B1774EB1BACCA4E90B8C

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1455 MARKET ST 400-

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : BFB8C828480D41FFB2A

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DROPBOX**Mailing Address 185 BERRY ST  
4TH FLOORCity  
SAN FRANCISCOState  
CAZip Code  
94107Purpose 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	5		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

12.19

Transaction ID : B19F4CCBCA6814966B97

☒ 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 85 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. TESLA INC**

Mailing Address 1 TESLA RD

Date of Disbursement

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

City  
AUSTINState  
TXZip Code  
78725-4400

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL: TRANSPORTATION

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2.29

Transaction ID : B1D451477B621430AB73

☒ 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. WHITEPAGES**

Mailing Address 2033 6TH AVE STE 1100

Date of Disbursement

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

City  
SEATTLEWAState  
WAZip Code  
98121

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5.99

Transaction ID : B2E95B37BA85C42D692E

☒ 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. LINKEDIN**

Mailing Address 2029 STIERLIN CT

Date of Disbursement

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

City  
MOUNTAIN VIEWState  
CAZip Code  
94043-4655

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTION

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

119.99

Transaction ID : BCECBA5B03326462A913

☒ 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 86 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. TESLA INC**

Mailing Address 1 TESLA RD

Date of Disbursement

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

City  
AUSTINState  
TXZip Code  
78725-4400

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL: TRANSPORTATION

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3.14

Transaction ID : BC8B3103610A44E2B93B

☒ 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. UBER**

Mailing Address 1455 MARKET ST 400-

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

86.92

Transaction ID : B1B0102A8B54544FDA76

☒ 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. TESLA INC**

Mailing Address 1 TESLA RD

Date of Disbursement

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

City  
AUSTINState  
TXZip Code  
78725-4400

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL: TRANSPORTATION

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5.76

Transaction ID : BDA58AE32382342E99F0

☒ 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 87 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET ST 400-

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

115.59

Transaction ID : BC8EA6E4642C240F3BCE

☒ 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. FOUR SEASONS HOTEL WESTLAKE VILLAGE**

Mailing Address 2 DOLE DR

Date of Disbursement

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

City  
WESTLAKE VILLAGEState  
CAZip Code  
91362-7300

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL :LODGING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

266.79

Transaction ID : B75C5F5177B044CD3B4D

☒ 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. HOTEL AVALON**

Mailing Address 9000 AVALON WY

Date of Disbursement

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

City  
ALPHARETTAState  
GAZip Code  
30009-2488

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL :LODGING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

278.85

Transaction ID : BFDB51FBE7E6B46139E3

☒ 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 88 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 200 VESEY STREET

City  
MANHATTANState  
NYZip Code  
10080Purpose of Disbursement  
CREDIT CARD PAYMENT

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

1752.10

Transaction ID : BFF1DA1D1BD4E4E6884E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC**

Mailing Address 251 H ST NW

City  
WASHINGTONState  
DCZip Code  
20001-2604Purpose of Disbursement  
EVENT SITE RENTAL

001

Candidate Name

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC

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 C00797670

Amount of Each Disbursement this Period

250.00

Transaction ID : B321337B06DF741EA9DD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC**

Mailing Address 251 H ST NW

City  
WASHINGTONState  
DCZip Code  
20001-2604Purpose of Disbursement  
EVENT SITE RENTAL

001

Candidate Name

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC

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 C00797670

Amount of Each Disbursement this Period

250.00

Transaction ID : B92C9BB2C55914F058FC

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

2252.10

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. ANEDOT**Mailing Address 1340 POYDRAS STREET  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD FEES

003

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

104.93

Transaction ID : B3083DFC2CC1149F6848

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**Mailing Address 1340 POYDRAS STREET  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD FEES

003

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	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6.23

Transaction ID : B4DDC2B1670A0404383E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**Mailing Address 1340 POYDRAS STREET  
SUITE 1770City  
NEW ORLEANSState  
LAZip Code  
70112Purpose of Disbursement  
CREDIT CARD FEES

003

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

10.28

Transaction ID : BCB6F86A5DEB74162984

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

121.44

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address P.O. BOX 716045

City  
PHILADELPHIAState  
PAZip Code  
19171-6045Purpose 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 : BB3A7C23EA0C7494FA43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ART AND COPY PARTNERS LLC**Mailing Address 3245 PEACHTREE PKWY  
STE D 238City  
SUWANEEState  
GAZip Code  
30024-6054Purpose 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

500.00

Transaction ID : B28B179F8B108404EA7F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. 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 : B8C8E03DD96EE46198DE

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

5205.00

**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 91 OF 150

<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)

FRIENDS OF MCCORMICK

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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B6145056C366C4C24BD0

☐ 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 : B33AFDC137C0C446DB5B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. 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 : BF30C1AF4F1BB4FB0995

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

5610.00

**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 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)

FRIENDS OF MCCORMICK

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		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2300.00

Transaction ID : B26C08F83983D484E810

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BITTERSWEET CATERING**

Mailing Address 823 KING ST

City  
ALEXANDRIAState  
VAZip Code  
22314-3016Purpose of Disbursement  
CATERING

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

464.65

Transaction ID : BD2938A7735F444E4828

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOGART ASSOCIATES, INC**

Mailing Address 1200 TRINITY DR

City  
ALEXANDRIAState  
VAZip Code  
22314-4724Purpose 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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5421.21

Transaction ID : B4B4E2C29F644452882B

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

8185.86

**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 93 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. BOGART ASSOCIATES, INC**

Mailing Address 1200 TRINITY DR

City  
ALEXANDRIAState  
VAZip Code  
22314-4724Purpose 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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : BEFE453A1C1884F8BB7D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOGART ASSOCIATES, INC**

Mailing Address 1200 TRINITY DR

City  
ALEXANDRIAState  
VAZip Code  
22314-4724Purpose 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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : B6584634F7BFC4DE0B68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOGART ASSOCIATES, INC**

Mailing Address 1200 TRINITY DR

City  
ALEXANDRIAState  
VAZip Code  
22314-4724Purpose 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

1331.90

Transaction ID : B0A45B061F5D54E789B7

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

8331.90

**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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SOUTH EAST

Date of Disbursement

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

City  
WASHINGTONDCState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

1331.90

Transaction ID : BEFE44D35B65449CD800

☒ 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. BOGART ASSOCIATES, INC**

Mailing Address 1200 TRINITY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		08		2025

City  
ALEXANDRIAState  
VAZip Code  
22314-4724

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

5421.21

Transaction ID : BF873ADBEF3B948ADA67

☐ 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. BOGART ASSOCIATES, INC**

Mailing Address 1200 TRINITY DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2025

City  
ALEXANDRIAState  
VAZip Code  
22314-4724

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

3036.81

Transaction ID : B68C0FD8D1C194310A46

☐ 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).....▶

8458.02

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. BOONES RESTAURANT**

Mailing Address 2205 NORTHSIDE DR NW

City  
ATLANTAState  
GAZip Code  
30305-3902Purpose 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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

234.32

Transaction ID : B68319AAADC824E59910

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CASAS, ANN, , ,**

Mailing Address 281 GALESBURG DR

City  
LAWRENCEVILLEState  
GAZip Code  
30044-4866Purpose 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		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B74054A3BA2BB4FFDBA7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN 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	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BE1AEA4CCD9A845A3953

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

2759.32

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		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 : B133C268C781943DBAA1

☐ 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. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		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 : B98181138A7E2463FAF6

☐ 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. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		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 : B7604D45222A8442BA7C

☐ 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).....▶

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 97 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		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 : B12BAAEE156224C68892

☐ 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 LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		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 : BFEC6C704B9CE4B63A15

☐ 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 LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		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 : BEC4DEC5C4A764667BFA

☐ 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).....▶

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 98 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN 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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B73E628FA523C4CE586A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN 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	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BFD6D4086FE62436FB00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN 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	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : BB41A531F0FBD4EADBE4

☐ 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 99 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		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 : B9529C42F746741318EA

☐ 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. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		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 : B551ACF3D620F4DD3924

☐ 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. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2025

City  
MC LEANState  
VAZip Code  
22101-5709

FEC Identification Number

C

Purpose of Disbursement  
BANK FEES

001

Amount of Each Disbursement this Period

12.00

Transaction ID : B3AE61A1841734BA7BCE

☐ 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).....▶

62.00

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B4AC536982BEF44C3944

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN 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 : BE321EB9BE91A4491ABB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN 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 : B16F37CCF8A2A47EE80B

☐ 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 101 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		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 : BA68D7C9EF16E430F8CB

☐ 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 LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		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 : B22937A9F70D74344BC8

☐ 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 LAUHGLIN 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 : B4B7A287481FE4AB780A

☐ 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).....▶

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 102 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN 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 : B2D6436D5FE604377B60

☐ 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 LAUHGLIN 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 : B0CCFC8E85C2A44D89E1

☐ 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 LAUHGLIN 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 : B517D94ED200D4B28AE7

☐ 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).....▶

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 103 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		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 : B29BF818D9A114FFDB59

☐ 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 LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		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 : B1130B60A925B4A8A8FB

☐ 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 LAUHGLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		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 : B7A6486EC6D5740B2A33

☐ 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).....▶

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 104 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHGLIN AVENUE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		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 : B98071FBDC94D4F338C8

☐ 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 LAUHGLIN AVENUE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		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 : BA4CED8E5EFD84C199E5

☐ 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 LAUHGLIN AVENUE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		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 : BF9692F60B38947E58B7

☐ 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).....▶

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 105 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAIN BRIDGE BANK**

Mailing Address 1445A LAUHLIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		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 : B85032896439D4A48A31

☐ 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. CHAUL, ALEF, , ,**

Mailing Address 5025 NORTHRIDGE DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City  
CUMMINGState  
GAZip Code  
30040-1779

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

1000.00

Transaction ID : BAA590B653C444420995

☐ 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. CHAUL, ALEF, , ,**

Mailing Address 5025 NORTHRIDGE DR

Date of Disbursement

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

City  
CUMMINGState  
GAZip Code  
30040-1779

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

1000.00

Transaction ID : BEFED9883AF7E4961B8E

☐ 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).....▶

2025.00

**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 106 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CHAUL, ALEF, , ,**

Mailing Address 5025 NORTHRIDGE DR

City  
CUMMINGState  
GAZip Code  
30040-1779Purpose 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

1000.00

Transaction ID : B273CE77AB4434D6A95F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHAUL, ALEF, , ,**

Mailing Address 5025 NORTHRIDGE DR

City  
CUMMINGState  
GAZip Code  
30040-1779Purpose 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	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B7198DD857D02475FB9A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CITIBANK**

Mailing Address PO BOX 78025

City  
PHOENIXState  
AZZip Code  
85062-8025Purpose of Disbursement  
CREDIT CARD PAYMENT

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

734.09

Transaction ID : B7F7BEDCAE7534F9DBC2

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

2734.09

**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 107 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DELTA**

Mailing Address 1030 DELTA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2025

City  
ATLANTAState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Amount of Each Disbursement this Period

734.09

Transaction ID : B4D6D77E81319415B8F4

☒ 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. CITIBANK**

Mailing Address PO BOX 78025

Date of Disbursement

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

City  
PHOENIXState  
AZZip Code  
85062-8025

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD PAYMENT - MEMOS UNDER ITEMIZED THRESHOLD

001

Amount of Each Disbursement this Period

90.00

Transaction ID : B22461E6EC2B84BE681B

☐ 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. CITIBANK**

Mailing Address PO BOX 78025

Date of Disbursement

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

City  
PHOENIXState  
AZZip Code  
85062-8025

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD PAYMENT - MEMOS UNDER ITEMIZED THRESHOLD

001

Amount of Each Disbursement this Period

704.09

Transaction ID : BF3E907739F0146BCAF2

☐ 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).....▶

794.09

**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 108 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. CITIBANK**

Mailing Address PO BOX 78025

Date of Disbursement

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

City  
PHOENIXState  
AZZip Code  
85062-8025

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD PAYMENT - MEMOS UNDER ITEMIZED THRESHOLD

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

90.00

Transaction ID : B1B6647F012334A48B50

☐ 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. COSPER, WYATT, , ,**

Mailing Address 4410 LAUREL GROVE TRCE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2025

City  
SUWANEEState  
GAZip Code  
30024-6977

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSUTLING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : BFB0B63C943E74C3186E

☐ 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. COSPER, WYATT, , ,**

Mailing Address 4410 LAUREL GROVE TRCE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2025

City  
SUWANEEState  
GAZip Code  
30024-6977

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSUTLING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : B1F027FDEAF3945E8905

☐ 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).....▶

3090.00

**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 109 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. COSPER, WYATT, , ,**

Mailing Address 4410 LAUREL GROVE TRCE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

City  
SUWANEEState  
GAZip Code  
30024-6977

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSUTLING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4500.00

Transaction ID : B39BB3AE72FC14BD0AFD

☐ 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. DELTA**

Mailing Address 1030 DELTA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2025

City  
ATLANTAState  
GAZip Code  
30354-1989

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

428.96

Transaction ID : B167931E51C0C48A9B73

☐ 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  
UNIT 26418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		13		2025

City  
WASHINGTONState  
DCZip Code  
20001-0516

FEC Identification Number

C

Purpose of Disbursement  
PROCESSING FEES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

700.00

Transaction ID : B1C4D9C3F95BF4905939

☐ 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).....▶

5628.96

**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 110 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DEMOCRACY ENGINE LLC**Mailing Address 416 FLORIDA AVE NW  
UNIT 26418City  
WASHINGTONState  
DCZip Code  
20001-0516Purpose of Disbursement  
PROCESSING FEES

003

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

12.55

Transaction ID : B1B131A24050D44A8B4E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

122.50

Transaction ID : B4A46B72E80974250AAD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

122.50

Transaction ID : B21E005F4C5CA4829A8A

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

257.55

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DONATE RIGHT**

Mailing Address 300,

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : BE459850E394D41AF8B9

☐ 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. DONATE RIGHT**

Mailing Address 300,

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.76

Transaction ID : B3DF0C890540046158D5

☐ 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. DONATE RIGHT**

Mailing Address 300,

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3.50

Transaction ID : BD4DF74017CBB46068C0

☐ 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).....▶

49.26

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DONATE RIGHT**

Mailing Address 300,

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12.25

Transaction ID : B4FDF783D63164EDDB23

☐ 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. DONATE RIGHT**

Mailing Address 300,

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

8.75

Transaction ID : B1BD88ADAFB1F4664AEA

☐ 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. DONATE RIGHT**

Mailing Address 300,

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

8.75

Transaction ID : BACB84D6500084F3AAB9

☐ 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).....▶

29.75

**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)

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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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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

17.50

Transaction ID : B8478CAA23F9241718A7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.66

Transaction ID : B0F9E5EEF7B834B11A27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

17.50

Transaction ID : B98FE2E65DC4C4E18AF1

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

48.66

**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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DONATE RIGHT**

Mailing Address 300,

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : B7C790025DFC34C488E6

☐ 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. DONATE RIGHT**

Mailing Address 300,

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

8.75

Transaction ID : B4C85D7B9275448D3A4F

☐ 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. DONATE RIGHT**

Mailing Address 300,

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3.50

Transaction ID : BA1F4AD778DE14365A13

☐ 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).....▶

47.25

**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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

8.75

Transaction ID : B98FA631D706F4FF28D3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : B426A95A9C4704B42BEF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.22

Transaction ID : B422A368D503E42348BA

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

44.97

**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)

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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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

11.38

Transaction ID : B7963EE6B6E4E47429F5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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

87.50

Transaction ID : BF92BF2FC37A84FF2B75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DONATE RIGHT**

Mailing Address 300,

City  
ARLINGTONState  
VAZip Code  
22209Purpose 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	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

39.38

Transaction ID : B92C4296BE25449EFB0E

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

138.26

**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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. DOORDASH**

Mailing Address 303 2ND ST

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94107-1366

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

573.47

Transaction ID : BC0A1957E45CC4403A22

☐ 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. DOORDASH**

Mailing Address 303 2ND ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2025

City  
SAN FRANCISCOState  
CAZip Code  
94107-1366

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

34.97

Transaction ID : B8C4D56A149F143E1BA5

☐ 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. EMBROIDERY**

Mailing Address 2965 RING RD NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2025

City  
KENNESAWState  
GAZip Code  
30144-4912

FEC Identification Number

C

Purpose of Disbursement  
PRINTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

116.20

Transaction ID : B92FDA459F14849F1A48

☐ 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).....▶

724.64

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. FEED THE WELL**

Mailing Address 1530 PEACHTREE PKWY

Date of Disbursement

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

City  
CUMMINGState  
GAZip Code  
30041-9504

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

1227.83

Transaction ID : B47B5116561EE4F088B8

☐ 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. GENERAL DYNAMICS**

Mailing Address 11011 SUNSET HILLS ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2025

City  
RESTONState  
VAZip Code  
20190-5311

FEC Identification Number

C

Purpose of Disbursement  
EVENT FEES

007

Amount of Each Disbursement this Period

250.00

Transaction ID : BC184CF448F30438CB0E

☐ 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. GEORGIA DEPARTMENT OF REVENUE**

Mailing Address 1800 CENTURY BLVD NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2025

City  
ATLANTAState  
GAZip Code  
30345-3204

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL TAXES

001

Amount of Each Disbursement this Period

161.70

Transaction ID : B5639C78A7E1B448E9CB

☐ 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).....▶

1639.53

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. GEORGIA DEPARTMENT OF REVENUE**

Mailing Address 1800 CENTURY BLVD NE

Date of Disbursement

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

City  
ATLANTAState  
GAZip Code  
30345-3204

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

67.96

Transaction ID : B9C80588C4AE04644851

☐ 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. HOMESTEAD**

Mailing Address 420 VISION DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		09		2025

City  
CUMMINGState  
GAZip Code  
30040

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

196.68

Transaction ID : B6E4986F975014643A3B

☐ 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. HOUTSMA, ELLIA, , ,**

Mailing Address PO BOX 183

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City  
HUDSONState  
WIZip Code  
54016-0183

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B757BFC3A3B954A81953

☐ 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).....▶

1264.64

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. HOUTSMA, ELLIA, , ,**

Mailing Address PO BOX 183

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-0183

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : BDB857C08959C4449A8A

☐ 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. HOUTSMA, ELLIA, , ,**

Mailing Address PO BOX 183

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-0183

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : BC82FAC983AE142A0BFE

☐ 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. HOUTSMA, ELLIA, , ,**

Mailing Address PO BOX 183

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-0183

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : BA71F02205CE74BD7827

☐ 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).....▶

1500.00

**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 121 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. HOUTSMA, ELLIA, , ,**

Mailing Address PO BOX 183

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-0183

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B74F65DFDD914414BA30

☐ 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. JOECOFFEE**

Mailing Address 510 FLAT SHOALS AVE SE

Date of Disbursement

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

City  
ATLANTAState  
GAZip Code  
30316-2044

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

89.88

Transaction ID : B0FD49705B893472481F

☐ 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. JOECOFFEE**

Mailing Address 510 FLAT SHOALS AVE SE

Date of Disbursement

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

City  
ATLANTAState  
GAZip Code  
30316-2044

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

121.20

Transaction ID : BEF533315DBDB4BAFBA2

☐ 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).....▶

711.08

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. JOECOFFEE**

Mailing Address 510 FLAT SHOALS AVE SE

Date of Disbursement

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

City  
ATLANTAState  
GAZip Code  
30316-2044

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

21.19

Transaction ID : BCC87EF63C82A4F588A0

☐ 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. KROGER**

Mailing Address 400 PEACHTREE INDUSTRIALSTE 17

Date of Disbursement

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

City  
SUWANEEState  
GAZip Code  
30024

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

007

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

61.46

Transaction ID : B4ECC638486974EBD901

☐ 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. KROGER**

Mailing Address 400 PEACHTREE INDUSTRIALSTE 17

Date of Disbursement

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

City  
SUWANEEState  
GAZip Code  
30024

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

007

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.06

Transaction ID : B444693C7CA924D19B8F

☐ 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).....▶

106.71

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. KROGER**

Mailing Address 400 PEACHTREE INDUSTRIALSTE 17

Date of Disbursement

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

City  
SUWANEEState  
GAZip Code  
30024

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

007

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.52

Transaction ID : BAC48B0E91202475DB57

☐ 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. KROGER**

Mailing Address 400 PEACHTREE INDUSTRIALSTE 17

Date of Disbursement

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

City  
SUWANEEState  
GAZip Code  
30024

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

007

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

61.42

Transaction ID : BD44A5A40093047B5929

☐ 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. KROGER**

Mailing Address 400 PEACHTREE INDUSTRIALSTE 17

Date of Disbursement

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

City  
SUWANEEState  
GAZip Code  
30024

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

007

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

57.80

Transaction ID : BAB7634BB5251494FA7C

☐ 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).....▶

169.74

**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 124 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. KROGER**

Mailing Address 400 PEACHTREE INDUSTRIALSTE 17

Date of Disbursement

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

City  
SUWANEEState  
GAZip Code  
30024

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

007

Amount of Each Disbursement this Period

48.21

Transaction ID : B73420416006E4D00ADD

☐ 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. LOS RIOS CANTINA**

Mailing Address 440 VISION DR

Date of Disbursement

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

City  
CUMMINGState  
GAZip Code  
30040

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

148.44

Transaction ID : BD3C5B4FB8027498190F

☐ 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. MARKARIE INC.**

Mailing Address 3214 POST WOODS DR NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

City  
ATLANTAState  
GAZip Code  
30339-5531

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

850.00

Transaction ID : B7C590C16015349AB92C

☐ 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).....▶

1046.65

**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 125 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. MARKARIE INC.**

Mailing Address 3214 POST WOODS DR NW

City  
ATLANTAState  
GAZip Code  
30339-5531Purpose 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	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

850.00

Transaction ID : BAE54B52E9DF44C5180D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARKARIE INC.**

Mailing Address 3214 POST WOODS DR NW

City  
ATLANTAState  
GAZip Code  
30339-5531Purpose 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	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

850.00

Transaction ID : BD23292F3B49A42CD88A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCCORMICK, RICHARD, DEAN, DR.,**

Mailing Address 4410 LAUREL GROVE TRCE

City  
SUWANEEState  
GAZip Code  
30024-6977Purpose 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	5		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

49.44

Transaction ID : BF755D2BDD1C14171BA8

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

1749.44

**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 126 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. NOTHING BUNDT CAKE**Mailing Address 4560 BELT LINE RD  
STE 350City  
ADDISONState  
TXZip Code  
75001-4560Purpose 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		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

52.93

Transaction ID : B6371A7788E7A4754B71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OFFICE DEPOT**

Mailing Address 3131 LAWRENCEVILLE-SUWANEE ROAD

City  
SUWANEEState  
GAZip Code  
30024Purpose of Disbursement  
OFFICE SUPPLIES

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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

134.40

Transaction ID : B2E195C8B28D645968AA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OFFICE DEPOT**

Mailing Address 3131 LAWRENCEVILLE-SUWANEE ROAD

City  
SUWANEEState  
GAZip Code  
30024Purpose of Disbursement  
OFFICE SUPPLIES

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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

73.81

Transaction ID : B998CDC2463A147D98A6

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

261.14

**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 127 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. OLIVE AND COCOA LLC**

Mailing Address 6345 W 300 S

Date of Disbursement

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

City  
SALT LAKE CITYState  
UTZip Code  
84104-6017

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

75.97

Transaction ID : B846E306D515F4C908B4

☐ 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. OLIVE AND COCOA LLC**

Mailing Address 6345 W 300 S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	5

City  
SALT LAKE CITYState  
UTZip Code  
84104-6017

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

145.46

Transaction ID : B2E245D955D6F469A847

☐ 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. PAYCHEX**

Mailing Address 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

686.63

Transaction ID : B7E18AF46A762460B960

☐ 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).....▶

908.06

**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 128 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL WAGES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

11354.27

Transaction ID : B9E65EB4C51174C10A45

☐ 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 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL WAGES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1666.00

Transaction ID : BCFC53176EBFB414EAE3

☐ 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. PAYCHEX**

Mailing Address 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL WAGES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.00

Transaction ID : B412C61009DA64667928

☐ 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).....▶

13021.27

**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 129 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

142.57

Transaction ID : B260F2D4351E540ADB5D

☐ 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 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL WAGES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2097.77

Transaction ID : BB32AA27E18B5414EAA4

☐ 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. PAYCHEX**

Mailing Address 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

527.63

Transaction ID : BECEF32EF7C64482DA57

☐ 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).....▶

2767.97

**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 130 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 1020 DISCOVERY RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2025

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL WAGES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10000.00

Transaction ID : B65E349AB86D84F55B6C

☐ 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. CASAS, ANN, , ,**

Mailing Address 281 GALESBURG DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2025

City  
LAWRENCEVILLEState  
GAZip Code  
30044-4866

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10000.00

Transaction ID : BEAB8E54B4BCC401BB88

☒ 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. PAYCHEX**

Mailing Address 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

139.49

Transaction ID : BFC8D6D8F78B04015B3B

☐ 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).....▶

10139.49

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL WAGES

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) ▼		

Amount of Each Disbursement this Period

10000.00

Transaction ID : BFE86C2593F7D4DF9817

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. CASAS, ANN, , ,**

Mailing Address 281 GALESBURG DR

Date of Disbursement

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

City  
LAWRENCEVILLEState  
GAZip Code  
30044-4866

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

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) ▼		

Amount of Each Disbursement this Period

10000.00

Transaction ID : BA79DFE56DD16484A893

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. PAYCHEX**

Mailing Address 1020 DISCOVERY RD

Date of Disbursement

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

City  
EAGANState  
MNZip Code  
55121-2095

FEC Identification Number

C

Purpose 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) ▼		

Amount of Each Disbursement this Period

139.49

Transaction ID : B78B9DC7A33D94F70B85

☐ Memo Item

State:

District:

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

10139.49

**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 132 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. PUBLIX**

Mailing Address 5885 CUMMING HWY

Date of Disbursement

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

City  
SUGAR HILLState  
GAZip Code  
30518

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

111.22

Transaction ID : B82E6D94B7CDC44438F8

☐ 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. ROCKETREACH**Mailing Address 144 N 7TH ST  
PO BOX 421

Date of Disbursement

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

City  
BROOKLYNState  
NYZip Code  
11249-2920

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTION

001

Amount of Each Disbursement this Period

174.08

Transaction ID : B4E5F88AFE4594299BB3

☐ 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. ROCKETREACH**Mailing Address 144 N 7TH ST  
PO BOX 421

Date of Disbursement

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

City  
BROOKLYNState  
NYZip Code  
11249-2920

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTION

001

Amount of Each Disbursement this Period

174.08

Transaction ID : BFC43BF43B18E4630A1B

☐ 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).....▶

459.38

**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 133 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. ROCKETREACH**Mailing Address 144 N 7TH ST  
PO BOX 421City  
BROOKLYNState  
NYZip Code  
11249-2920Purpose 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		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

174.08

Transaction ID : B11FCF71ADC95477ABAE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

City  
HUDSONState  
WIZip Code  
54016-1783Purpose of Disbursement  
ACCOUNTING 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	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

270.00

Transaction ID : B263142918D834C0B81C

☐ 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	4		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

17.50

Transaction ID : B7277657FB5A043AEB35

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

461.58

**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 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

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

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.00

Transaction ID : B74AB41FBB5704F789B6

☐ 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. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

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

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

18.44

Transaction ID : BE93D67FBA8154173A58

☐ 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. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2025

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

20.00

Transaction ID : B6C34242024F447DFA21

☐ 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).....▶

53.44

**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 135 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

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

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.00

Transaction ID : BD9739074AC2E45FD895

☐ 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. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2025

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.00

Transaction ID : BECBC70179ED64B1196F

☐ 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. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

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

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

11.46

Transaction ID : BCA9F943A2C324B18AA3

☐ 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).....▶

41.46

**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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

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

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.00

Transaction ID : BD77400E3003C4299893

☐ 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. STARBUCKS**

Mailing Address 11720 MEDLOCK BRG RD STE 168

Date of Disbursement

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

City  
DULUTHState  
GAZip Code  
30097

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.00

Transaction ID : B716C0A6BB0E64149BCC

☐ 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. SUGARCANE STRATEGIES, INC**

Mailing Address 2222 CUMMING RD

Date of Disbursement

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

City  
AUGUSTAState  
GAZip Code  
30904-6901

FEC Identification Number

C

Purpose of Disbursement  
CAMPAIGN CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : B2BA8E9E8B6E2410C89D

☐ 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).....▶

2525.00

**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 137 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. SUGARCANE STRATEGIES, INC**

Mailing Address 2222 CUMMING RD

City  
AUGUSTAState  
GAZip Code  
30904-6901Purpose 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	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BF6C9F1CA4A944ECA841

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SUGARCANE STRATEGIES, INC**

Mailing Address 2222 CUMMING RD

City  
AUGUSTAState  
GAZip Code  
30904-6901Purpose 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	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B087CF0E64BFB4497A68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SUMMERS, CATHERINE, , ,**

Mailing Address 7297 RIVERSIDE DR

City  
ATLANTAState  
GAZip Code  
30328-1154Purpose 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	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

156.80

Transaction ID : B8F70DFD2B994464AB50

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

5156.80

**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 138 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. SUMMERS, CATHERINE, , ,**

Mailing Address 7297 RIVERSIDE DR

City  
ATLANTAState  
GAZip Code  
30328-1154Purpose 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

500.00

Transaction ID : B110168CA332444A288F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SUMMERS, CATHERINE, , ,**

Mailing Address 7297 RIVERSIDE DR

City  
ATLANTAState  
GAZip Code  
30328-1154Purpose 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

3750.00

Transaction ID : B4420F6FD82D04DB38BDF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SUMMERS, CATHERINE, , ,**

Mailing Address 7297 RIVERSIDE DR

City  
ATLANTAState  
GAZip Code  
30328-1154Purpose 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		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3750.00

Transaction ID : B46383987892844798DA

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

8000.00

**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 139 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. SUMMERS, CATHERINE, , ,**

Mailing Address 7297 RIVERSIDE DR

City  
ATLANTAState  
GAZip Code  
30328-1154Purpose 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

3750.00

Transaction ID : B8030E91D43E14B249CD

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SUMMERS, CATHERINE, , ,**

Mailing Address 7297 RIVERSIDE DR

City  
ATLANTAState  
GAZip Code  
30328-1154Purpose 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		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3750.00

Transaction ID : BE8CA5A0D05694034A87

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE STONERIDGE GROUP (SRG)**

Mailing Address 960 NORTH PT PKWY

City  
ALPHARETTAState  
GAZip Code  
30005Purpose of Disbursement  
WEBSITE

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	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.95

Transaction ID : B86F339DC011740BC864

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

7519.95

**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 140 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. THE STONERIDGE GROUP (SRG)**

Mailing Address 960 NORTH PT PKWY

City  
ALPHARETTAState  
GAZip Code  
30005Purpose of Disbursement  
WEBSITE

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

19.95

Transaction ID : BC562815C74DF42B3867

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE STONERIDGE GROUP (SRG)**

Mailing Address 960 NORTH PT PKWY

City  
ALPHARETTAState  
GAZip Code  
30005Purpose of Disbursement  
WEBSITE

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	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.95

Transaction ID : BD8A7BCD7035A4384BBF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD.  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose 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

0.99

Transaction ID : B1E000AB0CBE2496B91A

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

40.89

**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 141 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD.  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose 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		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.39

Transaction ID : BCC38EB5C02614B86A60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE PROSPER GROUP**

Mailing Address PO BOX 488

City  
GREENWOODState  
INZip Code  
46142-0488Purpose 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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.00

Transaction ID : B25D1EAB17C53480496D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD.  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
DONATIONS

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	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.39

Transaction ID : B9C98B2774C4945F2A32

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

1.39

**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 142 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD.  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose 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

1.97

Transaction ID : B21211EFA66F94553AFF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD.  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose 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

0.99

Transaction ID : B3211AC1A97384274B2D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD.  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose 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

1.39

Transaction ID : BA3EC90F6028442598E4

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

4.35

**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 143 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. THE PROSPER GROUP**

Mailing Address PO BOX 488

Date of Disbursement

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

City  
GREENWOODState  
INZip Code  
46142-0488

FEC Identification Number

C

Purpose of Disbursement  
DIGITAL CONSULTING

001

Amount of Each Disbursement this Period

1.00

Transaction ID : B02904B0E8CBD488FAFB

☒ 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	5		0	8		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
DONATIONS

001

Amount of Each Disbursement this Period

0.39

Transaction ID : B2621A61D19E248F589F

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

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Amount of Each Disbursement this Period

1.39

Transaction ID : BB9F2732B7D45471D984

☐ 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).....▶

1.39

**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 144 OF 150

<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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. ZOOMINFO TECHNOLOGIES LLC**

Mailing Address 805 BROADWAY, SUITE 900

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City  
VANCOUVERState  
WAZip Code  
98660-3506

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

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) ▼		

Amount of Each Disbursement this Period

2669.25

Transaction ID : B95491F11C83B4699B58

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. ZOOMINFO TECHNOLOGIES LLC**

Mailing Address 805 BROADWAY, SUITE 900

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2025

City  
VANCOUVERState  
WAZip Code  
98660-3506

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUBSCRIPTIONS

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) ▼		

Amount of Each Disbursement this Period

1613.92

Transaction ID : B07D7FFB58FD549C2B54

☐ Memo Item

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

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) ▼		

Amount of Each Disbursement this Period

☐ Memo Item

State:

District:

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

4283.17

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

190006.36

**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 145 OF 150

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. MCCORMICK VICTORY FUND**

Mailing Address PO BOX 183

City  
HUDSONState  
WIZip Code  
54016Purpose of Disbursement  
TRANSFER: TRANSFER TO AUTHORIZED COMMITTEE

008

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

24000.00

Transaction ID : B7A440E31BE78467187B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

24000.00

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

24000.00

**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 146 OF 150

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input checked="" 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)

**FRIENDS OF MCCORMICK**

Full Name (Last, First, Middle Initial)

**A. MCCORMICK, RICHARD, DEAN, DR.,**

Mailing Address 4410 LAUREL GROVE TRCE

Date of Disbursement

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

City  
SUWANEEState  
GAZip Code  
30024-6977

FEC Identification Number

**C** C00706747Purpose of Disbursement  
LOAN REPAYMENT: LOAN RECEIVEDCandidate Name  
MCCORMICK, RICHARD, DEAN, DR.,Category/  
Type

Amount of Each Disbursement this Period

800.00

Transaction ID : BFC364366D2D34EE8B9B

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA

District: 07

Full Name (Last, First, Middle Initial)

**B. MCCORMICK, RICHARD, DEAN, DR.,**

Mailing Address 4410 LAUREL GROVE TRCE

Date of Disbursement

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

City  
SUWANEEState  
GAZip Code  
30024-6977

FEC Identification Number

**C** C00706747Purpose of Disbursement  
LOAN REPAYMENT: LOAN RECEIVEDCandidate Name  
MCCORMICK, RICHARD, DEAN, DR.,Category/  
Type

Amount of Each Disbursement this Period

203000.00

Transaction ID : B9AD0EC582892490EA38

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA

District: 07

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

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

203800.00

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

203800.00

**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 147 OF 150

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

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NAME OF COMMITTEE (In Full)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. AUERBACH, LORNA, , ,**

Mailing Address 1079 AMALFI DR

City  
PACIFIC PALISADESState  
CAZip Code  
90272-4029Purpose of Disbursement  
REFUND: REFUND OF CONTRIBUTIONS

010

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	6		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7000.00

Transaction ID : BEAD0FC907DBF4D6FBA9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HAMILTON, ANNE, , ,**

Mailing Address 4474 WHITESTONE WAY

City  
SUWANEEState  
GAZip Code  
30024-7593Purpose of Disbursement  
REFUND: REFUND OF CONTRIBUTIONS

010

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	4		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : BF61AFAE1AA8D43BEB9E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TAM, BRIAN, R, ,**

Mailing Address 4410 DORSET LN

City  
SUWANEEState  
GAZip Code  
30024-3324Purpose of Disbursement  
REFUND: REFUND OF CONTRIBUTIONS

010

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	4		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B9AD3ED39C7374E5493B

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

17500.00

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

17500.00

**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 148 OF 150

<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

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)

FRIENDS OF MCCORMICK

Full Name (Last, First, Middle Initial)

**A. COBB VETERANS MEMORIAL FOUNDATION, INC**Mailing Address 1870 THE EXCHANGE SE  
STE 200City  
ATLANTAState  
GAZip Code  
30339-2021Purpose of Disbursement  
DONATION

012

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	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BD8020AE414954AFE808

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

2500.00

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

2500.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 149 OF 150

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 : CEA9252B1E6094D579C2

FRIENDS OF MCCORMICK

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

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

MCCORMICK, RICHARD, DEAN, DR.,

Mailing Address

4410 LAUREL GROVE TRCE

City

SUWANEE

State

GA

ZIP Code

30024-6977

☒ Personal Funds of the Candidate

Original Amount of Loan

240000.00

Cumulative Payment To Date

241000.00

Balance Outstanding at Close of This Period

- 1000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
12 31 / 2021M M / D D / Y Y Y Y  
NONEY 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).....▶

- 1000.00

**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 150 OF 150

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 : C09E97A60ABB14AC58CA

FRIENDS OF MCCORMICK

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

Election: 2022

☒ Primary☐ General☐ Other (specify) ▼

MCCORMICK, RICHARD, DEAN, DR.,

Mailing Address

4410 LAUREL GROVE TRCE

City

SUWANEE

State

GA

ZIP Code

30024-6977

☒ Personal Funds of the Candidate

Original Amount of Loan

160000.00

Cumulative Payment To Date

159000.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
12 31 / 2021M M / D D / Y Y Y Y  
12 31 / 2022M M / D D / Y Y Y Y  
12 31 / 2022

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).....▶

1000.00

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

0.00

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