

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

LAUREL LEE FOR CONGRESS, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2025 To: M M / D D / Y Y Y Y 09 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	255850.79	559410.26
(b) Total Contribution Refunds (from Line 20(d))	0.00	1400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	255850.79	558010.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	95109.35	400634.12
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	95109.35	400634.12
8. Cash on Hand at Close of Reporting Period (from Line 27)	1097437.10	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	7500.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

LAUREL LEE FOR CONGRESS, INC.

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2025 To: M M / D D / Y Y Y Y 09 / 30 / 2025

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	127704.00	215320.30
(ii) Unitemized.....	1146.79	4589.96
(iii) TOTAL of contributions from individuals ▶	128850.79	219910.26
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	127000.00	339500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	255850.79	559410.26
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	99003.96	411398.58
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	354854.75	970808.84

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.....	95109.35	400634.12
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	1400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1400.00
21. OTHER DISBURSEMENTS	1800.00	1800.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	96909.35	403834.12

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	839491.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	354854.75
25. SUBTOTAL (add Line 23 and Line 24).....	1194346.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	96909.35
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1097437.10

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AMOR, VICENTE, , ,

Mailing Address 1702 WOODMARKER CT

City: BRANDON State: FL Zip Code: 33510

FEC ID number of contributing federal political committee: C

Name of Employer: ASC INTERNATIONAL USA Occupation: INFORMATION REQUESTED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt: 08 / 08 / 2025

Transaction ID : SA11AI.160402708

Amount of Each Receipt this Period: 3000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AVILES, DIONEL, M, ,

Mailing Address 800 NORTH TAMIAMI TRAIL

City: SARASOTA State: FL Zip Code: 34236

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 09 / 11 / 2025

Transaction ID : SA11AI.161232004

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BELTRAN, MICHAEL, P, ,

Mailing Address 15005 EAGLE PARK PL

City: LITHIA State: FL Zip Code: 33547

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 09 / 26 / 2025

Transaction ID : SA11AI.161595336

Amount of Each Receipt this Period: 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00

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

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

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

FOR LINE NUMBER: PAGE 6 OF 271
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BERGERIS, DEBRA, , ,
Mailing Address 13724 WALBROOKE DR
City TAMPA State FL Zip Code 33624
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 ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 04 / 2025
Transaction ID : SA11AI.161031244
Amount of Each Receipt this Period
2000.00
 Memo Item
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
BERGERIS, DEBRA, , ,
Mailing Address 13724 WALBROOKE DR
City TAMPA State FL Zip Code 33624
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 ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 04 / 2025
Transaction ID : SA11AI.161031244.1
Amount of Each Receipt this Period
- 1000.00
 Memo Item
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
BERGERIS, DEBRA, , ,
Mailing Address 13724 WALBROOKE DR
City TAMPA State FL Zip Code 33624
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 ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 04 / 2025
Transaction ID : SA11AI.161031244.2
Amount of Each Receipt this Period
1000.00
 Memo Item
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 7 OF 271	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BLAIR, ROBERT, M, ,

Mailing Address 408 PINE BLUFF DRIVE

City LUTZ	State FL	Zip Code 33549
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
09 / 04 / 2025

Transaction ID : SA11AI.161031241

Amount of Each Receipt this Period
2000.00

Memo Item
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
BLAIR, ROBERT, M, ,

Mailing Address 408 PINE BLUFF DRIVE

City LUTZ	State FL	Zip Code 33549
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
09 / 04 / 2025

Transaction ID : SA11AI.161031241.1

Amount of Each Receipt this Period
- 2000.00

Memo Item
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
BLAIR, ROBERT, M, ,

Mailing Address 408 PINE BLUFF DRIVE

City LUTZ	State FL	Zip Code 33549
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
09 / 04 / 2025

Transaction ID : SA11AI.161031241.2

Amount of Each Receipt this Period
2000.00

Memo Item
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... ▶	2000.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CASPER, BLAKE, J, ,

Mailing Address 4908 W NASSAU ST

City TAMPA State FL Zip Code 33607

FEC ID number of contributing federal political committee. C

Name of Employer THE CASPER COMPANIES Occupation CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
09 / 26 / 2025

Transaction ID : SA11AI.161595338

Amount of Each Receipt this Period
5000.00

Memo Item
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
CASPER, BLAKE, J, ,

Mailing Address 4908 W NASSAU ST

City TAMPA State FL Zip Code 33607

FEC ID number of contributing federal political committee. C

Name of Employer THE CASPER COMPANIES Occupation CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
09 / 26 / 2025

Transaction ID : SA11AI.161595338.1

Amount of Each Receipt this Period
- 1500.00

Memo Item
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
CASPER, BLAKE, J, ,

Mailing Address 4908 W NASSAU ST

City TAMPA State FL Zip Code 33607

FEC ID number of contributing federal political committee. C

Name of Employer THE CASPER COMPANIES Occupation CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
09 / 26 / 2025

Transaction ID : SA11AI.161595338.2

Amount of Each Receipt this Period
1500.00

Memo Item
REDESIGNATION FROM PRIMARY

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CHRISTALDI, RONALD, A, ,

Mailing Address 3321 W CARRINGTON ST

City TAMPA State FL Zip Code 33611

FEC ID number of contributing federal political committee. C

Name of Employer SHUMAKER Occupation LAWYER

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
08 / 08 / 2025

Transaction ID : SA11AI.160402704

Amount of Each Receipt this Period
3000.00

Memo Item
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
CHRISTALDI, RONALD, A, ,

Mailing Address 3321 W CARRINGTON ST

City TAMPA State FL Zip Code 33611

FEC ID number of contributing federal political committee. C

Name of Employer SHUMAKER Occupation LAWYER

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
08 / 08 / 2025

Transaction ID : SA11AI.160402704.1

Amount of Each Receipt this Period
- 1500.00

Memo Item
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
CHRISTALDI, RONALD, A, ,

Mailing Address 3321 W CARRINGTON ST

City TAMPA State FL Zip Code 33611

FEC ID number of contributing federal political committee. C

Name of Employer SHUMAKER Occupation LAWYER

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
08 / 08 / 2025

Transaction ID : SA11AI.160402704.2

Amount of Each Receipt this Period
1500.00

Memo Item
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DELAVERGNE, ROBIN, W, ,

Mailing Address 3629 S MACDILL AVE

City TAMPA State FL Zip Code 33629

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2025

Transaction ID : SA11AI.160402703

Amount of Each Receipt this Period
3000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DINGLE, PHILLIP, S, ,

Mailing Address 1112 CULBREATH ISLES DRIVE

City TAMPA State FL Zip Code 33629

FEC ID number of contributing federal political committee. C

Name of Employer HEALTHEDGE INVESTMENT PARTNERS Occupation PRIVATE EQUITY 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 Y
09 / 26 / 2025

Transaction ID : SA11AI.161595320

Amount of Each Receipt this Period
7000.00

Memo Item
SEE REDESIGNATION

C. Full Name (Last, First, Middle Initial)
DINGLE, PHILLIP, S, ,

Mailing Address 1112 CULBREATH ISLES DRIVE

City TAMPA State FL Zip Code 33629

FEC ID number of contributing federal political committee. C

Name of Employer HEALTHEDGE INVESTMENT PARTNERS Occupation PRIVATE EQUITY 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 Y
09 / 26 / 2025

Transaction ID : SA11AI.161595320.1

Amount of Each Receipt this Period
- 3500.00

Memo Item
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....▶ 10000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DINGLE, PHILLIP, S, ,

Mailing Address 1112 CULBREATH ISLES DRIVE

City TAMPA State FL Zip Code 33629

FEC ID number of contributing federal political committee.

Name of Employer HEALTHEDGE INVESTMENT PARTNERS Occupation PRIVATE EQUITY INVESTOR

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2025

Transaction ID : SA11AI.161595320.2

Amount of Each Receipt this Period

Memo Item
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
FAISON, JAY, W, ,

Mailing Address 1355 GREENWOOD CLFS STE 400

City CHARLOTTE State NC Zip Code 28204

FEC ID number of contributing federal political committee.

Name of Employer 2040 FOUNDATION Occupation FOUNDER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161697363

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
FAISON, JAY, W, ,

Mailing Address 1355 GREENWOOD CLFS STE 400

City CHARLOTTE State NC Zip Code 28204

FEC ID number of contributing federal political committee.

Name of Employer 2040 FOUNDATION Occupation FOUNDER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161697364

Amount of Each Receipt this Period

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 271	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
FARRELL, SEAN, M, ,

Mailing Address 645 14TH PL NE

City WASHINGTON	State DC	Zip Code 20002
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FEC ID number of contributing federal political committee. **C**

Name of Employer EAST CAPITAL ADVISORS	Occupation PRINCIPAL
---	-------------------------

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
07 / 29 / 2025

Transaction ID : SA11AI.160141414

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
FARRIOR, LAURA, F, ,

Mailing Address 1815 BAYSHORE BLVD

City TAMPA	State FL	Zip Code 33606
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
09 / 26 / 2025

Transaction ID : SA11AI.161595323

Amount of Each Receipt this Period
7000.00

Memo Item
SEE REDESIGNATION

C. Full Name (Last, First, Middle Initial)
FARRIOR, LAURA, F, ,

Mailing Address 1815 BAYSHORE BLVD

City TAMPA	State FL	Zip Code 33606
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
09 / 26 / 2025

Transaction ID : SA11AI.161595323.1

Amount of Each Receipt this Period
- 3500.00

Memo Item
REDESIGNATION TO GENERAL

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
FARRIOR, LAURA, F, ,

Mailing Address 1815 BAYSHORE BLVD

City TAMPA State FL Zip Code 33606

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
09 / 26 / 2025

Transaction ID : SA11AI.161595323.2

Amount of Each Receipt this Period
3500.00

Memo Item
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
FARRIOR, MARY LEE, NUNNALLY, ,

Mailing Address 3112 W ANGELES ST

City TAMPA State FL Zip Code 33629

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
09 / 26 / 2025

Transaction ID : SA11AI.161595330

Amount of Each Receipt this Period
7000.00

Memo Item
SEE REDESIGNATION

C. Full Name (Last, First, Middle Initial)
FARRIOR, MARY LEE, NUNNALLY, ,

Mailing Address 3112 W ANGELES ST

City TAMPA State FL Zip Code 33629

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
09 / 26 / 2025

Transaction ID : SA11AI.161595330.1

Amount of Each Receipt this Period
- 3500.00

Memo Item
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
FARRIOR, MARY LEE, NUNNALLY, ,

Mailing Address 3112 W ANGELES ST

City TAMPA State FL Zip Code 33629

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
09 / 26 / 2025

Transaction ID : SA11AI.161595330.2

Amount of Each Receipt this Period
3500.00

Memo Item
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
FERMAN, JAMES, L, , JR

Mailing Address 1306 W. KENNEDY BLVD

City TAMPA State FL Zip Code 33606

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

Name of Employer FERMAN AUTO MANAGEMENT Occupation DEALER

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
09 / 26 / 2025

Transaction ID : SA11AI.161595332

Amount of Each Receipt this Period
7000.00

Memo Item
SEE REDESIGNATION

C. Full Name (Last, First, Middle Initial)
FERMAN, JAMES, L, , JR

Mailing Address 1306 W. KENNEDY BLVD

City TAMPA State FL Zip Code 33606

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

Name of Employer FERMAN AUTO MANAGEMENT Occupation DEALER

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
09 / 26 / 2025

Transaction ID : SA11AI.161595332.1

Amount of Each Receipt this Period
- 3500.00

Memo Item
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
FERMAN, JAMES, L, , JR

Mailing Address 1306 W. KENNEDY BLVD

City TAMPA State FL Zip Code 33606

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

Name of Employer Ferman Auto Management Occupation DEALER

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
09 / 26 / 2025

Transaction ID : SA11AI.161595332.2

Amount of Each Receipt this Period
3500.00

Memo Item
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
GLENN, HARRY, J, ,

Mailing Address 1540 GULF BLVD
UNIT 404

City CLEARWATER State FL Zip Code 33767

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

Name of Employer VAN SCOYOC ASSOCIATES Occupation VICE PRESIDENT

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 11 / 2025

Transaction ID : SA11AI.160432310

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HEPSCHER, JOAN, M, ,

Mailing Address 12638 LAKE JOVITA BLVD

City DADE CITY State FL Zip Code 33525

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
09 / 26 / 2025

Transaction ID : SA11AI.161595337

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 16 OF 271	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input 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)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
HEPSCHER, WILLIAM, S, ,

Mailing Address 17911 BIMINI ISLE COURT

City TAMPA	State FL	Zip Code 33647
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer THE CANADIAN MEDSTORE	Occupation BROKER
---	----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161595341

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 5812 BAYSHORE BLVD

City TAMPA	State FL	Zip Code 33611
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161031239

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)
LILBURN, COREY, W, ,

Mailing Address 15831 TRACKSIDE DR

City ODESSA	State FL	Zip Code 33556
----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer ALLTRUST INSURANCE	Occupation BROKER
--	----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161595340

Amount of Each Receipt this Period

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MARKARIAN, ANNE, R, ,

Mailing Address 13561 AVISTA DRIVE

City TAMPA State FL Zip Code 33624

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
09 / 04 / 2025

Transaction ID : SA11AI.161031112

Amount of Each Receipt this Period
150.00

Memo Item

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

Mailing Address 3962 GEORGETOWN CT NW

City WASHINGTON State DC Zip Code 20007

FEC ID number of contributing federal political committee. C

Name of Employer H&M STRATEGIES Occupation PARTNER

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
08 / 04 / 2025

Transaction ID : SA11AI.160257006

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SANCHEZ, EULOGIO, J, ,

Mailing Address 1607 RIVERVIEW LN

City BRADENTON State FL Zip Code 34209

FEC ID number of contributing federal political committee. C

Name of Employer CARDIOVASCULAR AND VEIN CENTER OF F Occupation 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 Y
09 / 11 / 2025

Transaction ID : SA11AI.161232166

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2150.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
SCHERLIS, BENJAMIN, , ,

Mailing Address 7821 1ST AVE S

City ST. PETERSBURG State FL Zip Code 33707

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2025

Transaction ID : SA11AI.161595333

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 3406 W MULLEN AVE

City TAMPA State FL Zip Code 33609

FEC ID number of contributing federal political committee. C

Name of Employer MARCADIS SINGER PA Occupation ATTORNEY

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 Y
09 / 04 / 2025

Transaction ID : SA11AI.161031105

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 3322 SIERRA CIRCLE

City TAMPA State FL Zip Code 33629

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
08 / 08 / 2025

Transaction ID : SA11AI.160402705

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 271	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
STRASKE, JANICE, F, ,

Mailing Address 1909 S. BROOKLINE STREET

City TAMPA	State FL	Zip Code 33629
---------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
09 / 26 / 2025

Transaction ID : SA11AI.161595324

Amount of Each Receipt this Period
7000.00

Memo Item
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
STRASKE, JANICE, F, ,

Mailing Address 1909 S. BROOKLINE STREET

City TAMPA	State FL	Zip Code 33629
---------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
09 / 26 / 2025

Transaction ID : SA11AI.161595324.1

Amount of Each Receipt this Period
- 3500.00

Memo Item
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
STRASKE, JANICE, F, ,

Mailing Address 1909 S. BROOKLINE STREET

City TAMPA	State FL	Zip Code 33629
---------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

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
09 / 26 / 2025

Transaction ID : SA11AI.161595324.2

Amount of Each Receipt this Period
3500.00

Memo Item
REDESIGNATION FROM PRIMARY

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
STRASKE, STEPHEN, B, , II

Mailing Address 1909 S BROOKLINE STREET

City TAMPA State FL Zip Code 33629

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

Name of Employer FERMAN MOTOR CAR COMPANY, INC. Occupation ATTORNEY

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
09 / 26 / 2025

Transaction ID : SA11AI.161595325

Amount of Each Receipt this Period
7000.00

Memo Item
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
STRASKE, STEPHEN, B, , II

Mailing Address 1909 S BROOKLINE STREET

City TAMPA State FL Zip Code 33629

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

Name of Employer FERMAN MOTOR CAR COMPANY, INC. Occupation ATTORNEY

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
09 / 26 / 2025

Transaction ID : SA11AI.161595325.1

Amount of Each Receipt this Period
- 3500.00

Memo Item
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
STRASKE, STEPHEN, B, , II

Mailing Address 1909 S BROOKLINE STREET

City TAMPA State FL Zip Code 33629

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

Name of Employer FERMAN MOTOR CAR COMPANY, INC. Occupation ATTORNEY

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
09 / 26 / 2025

Transaction ID : SA11AI.161595325.2

Amount of Each Receipt this Period
3500.00

Memo Item
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

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

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

FOR LINE NUMBER: PAGE 21 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
SWINDAL, STEPHEN, , ,

Mailing Address 908 S 20TH ST

City TAMPA State FL Zip Code 33605

FEC ID number of contributing federal political committee. C

Name of Employer MARINE TOWING Occupation EXECUTIVE

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2025

Transaction ID : SA11AI.161595328

Amount of Each Receipt this Period
3000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TYSON, ANTHONY, M, ,

Mailing Address 5120 MARINA WAY
14008

City TAMPA State FL Zip Code 33611

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
08 / 08 / 2025

Transaction ID : SA11AI.160402707

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WELLS, JOHN, W, , III

Mailing Address 13630 DIAMOND HEAD DR

City TAMPA State FL Zip Code 33624

FEC ID number of contributing federal political committee. C

Name of Employer CONSULTING ENGINEERING ASSOCIATES Occupation MECHANICAL ENGINEER

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
09 / 04 / 2025

Transaction ID : SA11AI.161031108

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 22 OF 271
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 09 / 2025

Transaction ID : SA11AI.156634672

Amount of Each Receipt this Period
76.48

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 21 IRVING ST
APT 2

City NEWARK State NJ Zip Code 07104

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 ▼
272.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 06 / 2025

Transaction ID : SA11AI.156634803

Amount of Each Receipt this Period
24.75

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 10 / 2025

Transaction ID : SA11AI.156671954

Amount of Each Receipt this Period
34.65

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional)..... ▶	24.75
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MORRIS, RONALD, , ,

Mailing Address 4390 GOLD TRAIL WAY

City LOOMIS State CA Zip Code 95650

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 ▼
272.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 07 / 2025

Transaction ID : SA11AI.156672000

Amount of Each Receipt this Period
24.75

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11AI.156740148

Amount of Each Receipt this Period
49.50

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 5701 E LITTLE WELLS PASS

City CAVE CREEK State AZ Zip Code 85331

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

Name of Employer HONEYWELL Occupation PROJECT ENGINEER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
544.50

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 11 / 2025

Transaction ID : SA11AI.156740171

Amount of Each Receipt this Period
49.50

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 74.25

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 16 / 2025

Transaction ID : SA11AI.156815919

Amount of Each Receipt this Period
51.98

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 17 / 2025

Transaction ID : SA11AI.15685295

Amount of Each Receipt this Period
4.95

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 23 / 2025

Transaction ID : SA11AI.157216794

Amount of Each Receipt this Period
1000.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MORTIER, JEFF, , ,

Mailing Address 4948 ESKRIDGE TER NW

City WASHINGTON State DC Zip Code 20016

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

Name of Employer FARRAGUT PARTNERS Occupation CONSULTANT

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
07 / 20 / 2025

Transaction ID : SA11AI.157217340

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

B. Full Name (Last, First, Middle Initial)
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00797670

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1162.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 10 / 2025

Transaction ID : SA11AI.159990366

Amount of Each Receipt this Period
96.89

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 4250 FAIRFAX DR STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 25 / 2025

Transaction ID : SA11AI.160058214

Amount of Each Receipt this Period
505.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BREWER, ELIZABETH, , ,

Mailing Address 30 BEECHWOOD RD

City WEST CALDWELL State NJ Zip Code 07006

FEC ID number of contributing federal political committee. C

Name of Employer BIOMERIEUX Occupation LOBBYIST

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
505.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2025

Transaction ID : SA11AI.160058344

Amount of Each Receipt this Period
5.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 30 BEECHWOOD RD

City WEST CALDWELL State NJ Zip Code 07006

FEC ID number of contributing federal political committee. C

Name of Employer BIOMERIEUX Occupation LOBBYIST

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
505.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 23 / 2025

Transaction ID : SA11AI.160058344

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. C C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2025

Transaction ID : SA11AI.160081976

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 505.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MACKINNON, JEFFREY, , ,

Mailing Address 3753 OLIVER ST NW

City WASHINGTON State DC Zip Code 20015

FEC ID number of contributing federal political committee. C

Name of Employer FARRAGUT PARTNERS Occupation LOBBYIST

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
07 / 24 / 2025

Transaction ID : SA11AI.160082264

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. C C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date 107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 31 / 2025

Transaction ID : SA11AI.160193721

Amount of Each Receipt this Period
1700.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

C. Full Name (Last, First, Middle Initial)
LEWIS, MARY, MELINDA, ,

Mailing Address 6506 BLUE WING DR

City ALEXANDRIA State VA Zip Code 22307

FEC ID number of contributing federal political committee. C

Name of Employer BL PARTNERS GROUP Occupation PARTNER

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
07 / 29 / 2025

Transaction ID : SA11AI.160193761

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

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

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

FOR LINE NUMBER: PAGE 28 OF 271
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
THORNHILL, BARRETT, , ,
Mailing Address 6034 CORLAND CT

City MC LEAN State VA Zip Code 22101

FEC ID number of contributing federal political committee. C

Name of Employer FTP Occupation CONSULTANT

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
 07 / 29 / 2025

Transaction ID : SA11AI.160193762

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

B. Full Name (Last, First, Middle Initial)
WINRED
Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. C C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2025

Transaction ID : SA11AI.160222307

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

C. Full Name (Last, First, Middle Initial)
REYNOLDS, GARRETT, , ,
Mailing Address 616 W MONROE ST

City AUSTIN State TX Zip Code 78704

FEC ID number of contributing federal political committee. C

Name of Employer UPCODES Occupation FOUNDER

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
 07 / 30 / 2025

Transaction ID : SA11AI.160222401

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 29 OF 271	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON	State VA	Zip Code 22203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt

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

Transaction ID : SA11AI.160252393

Amount of Each Receipt this Period

1001.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 9322 MERLOT CIR

City SEFFNER	State FL	Zip Code 33584
-----------------	-------------	-------------------

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

Name of Employer SYCAMORE ENGINEERING INC	Occupation CEO
--	-------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2025

Transaction ID : SA11AI.160252442

Amount of Each Receipt this Period

1.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 9322 MERLOT CIR

City SEFFNER	State FL	Zip Code 33584
-----------------	-------------	-------------------

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

Name of Employer SYCAMORE ENGINEERING INC	Occupation CEO
--	-------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 31 / 2025

Transaction ID : SA11AI.160252443

Amount of Each Receipt this Period

1000.00

Memo Item
EARMARKED THROUGH WINRED

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

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

1001.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 06 / 2025

Transaction ID : SA11AI.160339983

Amount of Each Receipt this Period
3500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 5640 19TH ST N

City ARLINGTON State VA Zip Code 22205

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

Name of Employer Occupation
1607 STRATEGIES GOVT AFFAIRS

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 04 / 2025

Transaction ID : SA11AI.160340102

Amount of Each Receipt this Period
3500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2025

Transaction ID : SA11AI.160394675

Amount of Each Receipt this Period
40.59

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

3500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AVILES, JOSEPH, , ,

Mailing Address 21 IRVING ST
APT 2

City NEWARK State NJ Zip Code 07104

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 ▼
272.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 06 / 2025

Transaction ID : SA11AI.160394679

Amount of Each Receipt this Period
24.75

Memo Item
EARMARKED THROUGH WINRED

B. Full Name (Last, First, Middle Initial)
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00797670

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1162.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2025

Transaction ID : SA11AI.160398644

Amount of Each Receipt this Period
0.95

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 11 / 2025

Transaction ID : SA11AI.160427184

Amount of Each Receipt this Period
3009.90

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

24.75

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BUCKLEY, EDWARD, , ,

Mailing Address 2109 W WATROUS AVE

City TAMPA State FL Zip Code 33606

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

Name of Employer SCHOLAR EDUCATION Occupation CHAIRMAN

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2025

Transaction ID : SA11AI.160427281

Amount of Each Receipt this Period
3000.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 12 / 2025

Transaction ID : SA11AI.160434597

Amount of Each Receipt this Period
34.65

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 4390 GOLD TRAIL WAY

City LOOMIS State CA Zip Code 95650

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

Name of Employer SCHOLAR EDUCATION Occupation CHAIRMAN

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
272.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2025

Transaction ID : SA11AI.160434638

Amount of Each Receipt this Period
24.75

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 3024.75

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 13 / 2025

Transaction ID : SA11AI.160509218

Amount of Each Receipt this Period
49.50

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 5701 E LITTLE WELLS PASS

City CAVE CREEK State AZ Zip Code 85331

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

Name of Employer Occupation
HONEYWELL PROJECT ENGINEER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
544.50

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 11 / 2025

Transaction ID : SA11AI.160509780

Amount of Each Receipt this Period
49.50

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 14 / 2025

Transaction ID : SA11AI.160539292

Amount of Each Receipt this Period
1.98

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 49.50

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 19 / 2025

Transaction ID : SA11AI.160603631

Amount of Each Receipt this Period
1504.95

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 301 W KINNEAR PL

City SEATTLE State WA Zip Code 98119

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

Name of Employer Occupation
AMAZON CHIEF GLOBAL AFFAIRS LEGAL OFFICER

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
08 / 15 / 2025

Transaction ID : SA11AI.160604972

Amount of Each Receipt this Period
1500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 20 / 2025

Transaction ID : SA11AI.160674738

Amount of Each Receipt this Period
7000.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 271	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
PHILLIPS, KEVIN, , ,

Mailing Address 824 S ORLEANS AVE

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

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

Name of Employer PEI GLOBAL PARTNERS HOLDINGS LLC	Occupation INVESTMENT BANKING
--	----------------------------------

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
08 / 18 / 2025

Transaction ID : SA11AI.160675573

Amount of Each Receipt this Period
7000.00

Memo Item
EARMARKED THROUGH WINRED: SEE REDESIGNATION

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

Mailing Address 824 S ORLEANS AVE

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

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

Name of Employer PEI GLOBAL PARTNERS HOLDINGS LLC	Occupation INVESTMENT BANKING
--	----------------------------------

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
08 / 18 / 2025

Transaction ID : SA11AI.160675573.1

Amount of Each Receipt this Period
- 3500.00

Memo Item
REDESIGNATION TO GENERAL

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

Mailing Address 824 S ORLEANS AVE

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

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

Name of Employer PEI GLOBAL PARTNERS HOLDINGS LLC	Occupation INVESTMENT BANKING
--	----------------------------------

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
08 / 18 / 2025

Transaction ID : SA11AI.160675573.2

Amount of Each Receipt this Period
3500.00

Memo Item
REDESIGNATION FROM PRIMARY

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
08 / 27 / 2025

Transaction ID : SA11AI.160860156

Amount of Each Receipt this Period
50.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
08 / 29 / 2025

Transaction ID : SA11AI.160913492

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 2001 RHODE ISLAND AVE

City MCLEAN State VA Zip Code 22101

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

Name of Employer Occupation
S-3 GROUP CONSULTANT

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
08 / 27 / 2025

Transaction ID : SA11AI.160913532

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

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

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

500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 37 OF 271
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 02 / 2025

Transaction ID : SA11AI.160934877

Amount of Each Receipt this Period
950.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 4471 GREENWICH PKWY NW

City WASHINGTON State DC Zip Code 20007

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

Name of Employer Occupation
S-3 GROUP CONSULTANT

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
08 / 28 / 2025

Transaction ID : SA11AI.160934908

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 05 / 2025

Transaction ID : SA11AI.161084825

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional)..... ▶	1000.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 38 OF 271	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input 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)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
HELLMANN, RALPH, , ,

Mailing Address 3310 OLD DOMINION BLVD

City ALEXANDRIA	State VA	Zip Code 22305
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer HM STRATEGIES	Occupation GOVERNMENT RELATION
-----------------------------------	-----------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161085351

Amount of Each Receipt this Period

Memo Item
EARMARKED THROUGH WINRED

B. Full Name (Last, First, Middle Initial)
BIPARTISAN NETWORK, LLC

Mailing Address 444 N. CAPITOL STREET, NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161169232

Amount of Each Receipt this Period

Memo Item
SOLE PROPRIETORSHIP: SEE ATTRIBUTION

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

Mailing Address 444 N. CAPITOL STREET NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161169233.0

Amount of Each Receipt this Period

Memo Item
BIPARTISAN NETWORK, LLC: SOLE PROPRIETOR

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 10 / 2025

Transaction ID : SA11AI.161192391

Amount of Each Receipt this Period
75.24

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 21 IRVING ST
APT 2

City NEWARK State NJ Zip Code 07104

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 ▼
272.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 06 / 2025

Transaction ID : SA11AI.161192399

Amount of Each Receipt this Period
24.75

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4390 GOLD TRAIL WAY

City LOOMIS State CA Zip Code 95650

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 ▼
272.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 07 / 2025

Transaction ID : SA11AI.161192396

Amount of Each Receipt this Period
24.75

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 49.50

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00797670

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1162.25

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 11 / 2025

Transaction ID : SA11AI.161252966

Amount of Each Receipt this Period
95.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON	State VA	Zip Code 22203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 12 / 2025

Transaction ID : SA11AI.161255432

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 1304 CHANCEL PL

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

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

Name of Employer OGR	Occupation GOVERNMENT RELATIONS
-------------------------	------------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 10 / 2025

Transaction ID : SA11AI.161255477

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶	500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : SA11AI.161267657

Amount of Each Receipt this Period
1549.50

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 723 W BRADDOCK RD

City ALEXANDRIA State VA Zip Code 22302

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

Name of Employer Occupation
BLOOM ENERGY VICE-PRESIDENT FEDERAL AFFAIRS

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 11 / 2025

Transaction ID : SA11AI.161267708

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 5701 E LITTLE WELLS PASS

City CAVE CREEK State AZ Zip Code 85331

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

Name of Employer Occupation
HONEYWELL PROJECT ENGINEER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
544.50

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 11 / 2025

Transaction ID : SA11AI.161267709

Amount of Each Receipt this Period
49.50

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional).....▶	549.50
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2025

Transaction ID : SA11AI.161314437

Amount of Each Receipt this Period
1.98

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2025

Transaction ID : SA11AI.161344097

Amount of Each Receipt this Period
3004.95

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 230 PITKIN MESA DR

City ASPEN State CO Zip Code 81611

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

Name of Employer Occupation
BROWNSTEIN LLP MANAGING PARTNER

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
09 / 13 / 2025

Transaction ID : SA11AI.161344945

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MCKEMEY, GEORGE, , ,

Mailing Address 425 E NELSON AVE

City ALEXANDRIA State VA Zip Code 22301

FEC ID number of contributing federal political committee. C

Name of Employer BROWNSTEIN Occupation GOVERNMENT AFFAIRS

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : SA11AI.161344944

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 6712 MARBO CT

City FALLS CHURCH State VA Zip Code 22046

FEC ID number of contributing federal political committee. C

Name of Employer BROWNSTEIN HYATT FARBER SCHRECK Occupation ATTORNEY

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : SA11AI.161344943

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

C. Full Name (Last, First, Middle Initial)
VAN ETTEN, WILLIAM, ROB, ,

Mailing Address 9 TROUT BROOK CT

City CHESTER State NJ Zip Code 07930

FEC ID number of contributing federal political committee. C

Name of Employer BC ENGINEERED PRODUCTS Occupation SELF-EMPLOYED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : SA11AI.161344942

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

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 Page

FOR LINE NUMBER: PAGE 44 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2025

Transaction ID : SA11AI.161363539

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 45 SUTTON SQ SW
UNIT 806

City WASHINGTON State DC Zip Code 20024

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

Name of Employer Occupation
YC CONSULTING CONSULTING

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
09 / 16 / 2025

Transaction ID : SA11AI.161363575

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 19 / 2025

Transaction ID : SA11AI.161390518

Amount of Each Receipt this Period
2000.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 45 OF 271		
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<input 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)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JOYNES, GRETA, , ,

Mailing Address 1210 CHADWICK AVE

City ALEXANDRIA	State VA	Zip Code 22308
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer BHFS	Occupation CONSULTANT
--------------------------	--------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161390579

Amount of Each Receipt this Period

Memo Item
 EARMARKED THROUGH WINRED

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

Mailing Address 40 COREY LN

City MENDHAM	State NJ	Zip Code 07945
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer ENTREPRENEUR	Occupation ENTREPRENEUR
----------------------------------	----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161390578

Amount of Each Receipt this Period

Memo Item
 EARMARKED THROUGH WINRED

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

Mailing Address 8402 CROSSLEY PL

City ALEXANDRIA	State VA	Zip Code 22308
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer FIERCEGR	Occupation GOVERNMENT RELATIONS
------------------------------	------------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161390577

Amount of Each Receipt this Period

Memo Item
 EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="2000.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 OF 271
(check only one)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2025

Transaction ID : SA11AI.161444788

Amount of Each Receipt this Period
4251.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 409 OVERBROOK DR

City BELLEAIR State FL Zip Code 33756

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

Name of Employer Occupation
DCA EXEC DIR

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1001.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2025

Transaction ID : SA11AI.161444992

Amount of Each Receipt this Period
1.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 409 OVERBROOK DR

City BELLEAIR State FL Zip Code 33756

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

Name of Employer Occupation
DCA EXEC DIR

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1001.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2025

Transaction ID : SA11AI.161444993

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

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

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

1001.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
HEAFITZ, JONATHAN, , ,

Mailing Address 2704 EMMET RD

City SILVER SPRING State MD Zip Code 20902

FEC ID number of contributing federal political committee. C

Name of Employer PCMA Occupation LOBBYIST

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
09 / 18 / 2025

Transaction ID : SA11AI.161444991

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 3965 S BLUE SAGE RD

City LAKE CHARLES State LA Zip Code 70605

FEC ID number of contributing federal political committee. C

Name of Employer M STREAM MANAGEMENT Occupation EXECUTIVE

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
09 / 18 / 2025

Transaction ID : SA11AI.161444990

Amount of Each Receipt this Period
2500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 922 N OVERLOOK DR

City ALEXANDRIA State VA Zip Code 22305

FEC ID number of contributing federal political committee. C

Name of Employer PBF ENERGY Occupation GOVERNMENT RELATIONS

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2025

Transaction ID : SA11AI.161444994

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 24 / 2025

Transaction ID : SA11AI.161494525

Amount of Each Receipt this Period
1000.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 204 CANAL CENTER PLZ

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation
TRAVERE THERAPEUTICS VICE PRESIDENT

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2025

Transaction ID : SA11AI.161494653

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 26 / 2025

Transaction ID : SA11AI.161595334

Amount of Each Receipt this Period
1500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
KUIPERS BLAKE, MELISSA, , ,

Mailing Address 9433 SILVERTHORN RD

City SEMINOLE State FL Zip Code 33777

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

Name of Employer BROWNSTEIN HYATT FARBER SCHRECK Occupation ATTORNEY

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
09 / 23 / 2025

Transaction ID : SA11AI.161595361

Amount of Each Receipt this Period
1500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 29 / 2025

Transaction ID : SA11AI.161617652

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

C. Full Name (Last, First, Middle Initial)
RICCIO, CLIFF, , , JR

Mailing Address 4810 25TH ST N

City ARLINGTON State VA Zip Code 22207

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

Name of Employer NCTA Occupation SVP

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
09 / 25 / 2025

Transaction ID : SA11AI.161617712

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161671993

Amount of Each Receipt this Period
1000.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 1640 DAVIDSON RD

City MC LEAN State VA Zip Code 22101

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

Name of Employer Occupation
BROWNSTEIN HYATT FARBER SCHRECK SHAREHOLDER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2025

Transaction ID : SA11AI.161672011

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161695120

Amount of Each Receipt this Period
1000.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

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

1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CHAPPELL, MICHAEL, , ,

Mailing Address 2818 UNIVERSITY TER NW

City WASHINGTON State DC Zip Code 20016

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

Name of Employer FIERCE GOVERNMENT RELATIONS Occupation 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 Y
09 / 29 / 2025

Transaction ID : SA11AI.161695213

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161716626

Amount of Each Receipt this Period
1500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

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

Mailing Address 601 PRESIDENT FORD LN

City ALEXANDRIA State VA Zip Code 22302

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

Name of Employer FIERCE GOVERNMENT RELATIONS Occupation 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 Y
09 / 30 / 2025

Transaction ID : SA11AI.161716658

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 52 OF 271	
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
SALVOSA, DONN, , ,

Mailing Address 1629 K ST NW
STE 300

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED	Occupation CONSULTANT
-----------------------------------	--------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161716659

Amount of Each Receipt this Period

Memo Item
 EARMARKED THROUGH WINRED

B. Full Name (Last, First, Middle Initial)
HUNTON ANDREWS KURTH LLP

Mailing Address 951 EAST BYRD STREET

City RICHMOND	State VA	Zip Code 23219
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161807893

Amount of Each Receipt this Period

Memo Item
 PARTNERSHIP: SEE ATTRIBUTIONS

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

Mailing Address 951 E BYRD ST

City RICHMOND	State VA	Zip Code 23219
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer HUNTON ANDREWS KURTH LLP	Occupation PARTNER
--	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161807935

Amount of Each Receipt this Period

Memo Item
 HUNTON ANDREWS KURTH LLP: PARTNER

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 271
(check only one)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AHN, NELSON, , ,

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161807936

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161807937

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161807938

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

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

0.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 54 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BECKER, RYAN, , ,

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161807939

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161807941

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
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SIMPSON, AARON, , ,

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TAYLOR, THOMAS, , ,

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VAN THUNEN, WILLIAM, , ,

Mailing Address 951 E BYRD ST

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 Other (specify) ▼

Election Cycle-to-Date ▼
10.00

Date of Receipt

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

Transaction ID : SA11AI.161808121

Amount of Each Receipt this Period

5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

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

0.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 116 OF 271		
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<input 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)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
VOWELL, MARK, , ,

Mailing Address 951 E BYRD ST

City RICHMOND	State VA	Zip Code 23219
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FEC ID number of contributing federal political committee.

Name of Employer HUNTON ANDREWS KURTH LLP	Occupation PARTNER
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161808125

Amount of Each Receipt this Period

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND	State VA	Zip Code 23219
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer HUNTON ANDREWS KURTH LLP	Occupation PARTNER
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161808126

Amount of Each Receipt this Period

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND	State VA	Zip Code 23219
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer HUNTON ANDREWS KURTH LLP	Occupation PARTNER
--	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AI.161808127

Amount of Each Receipt this Period

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 117 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WARREN, RICHARD, , ,

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161808128

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161808129

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10.00

Date of Receipt
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09 / 30 / 2025

Transaction ID : SA11AI.161808130

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

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

0.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 118 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WILLIAMS, AMY, , ,

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161808131

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161808132

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address 951 E BYRD ST

City RICHMOND State VA Zip Code 23219

FEC ID number of contributing federal political committee. C

Name of Employer HUNTON ANDREWS KURTH LLP Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date 10.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11AI.161808133

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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 Page

FOR LINE NUMBER: (check only one)		PAGE 119 OF 271	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ZDUNKEWICZ, DAVID, , ,

Mailing Address 951 E BYRD ST

City RICHMOND	State VA	Zip Code 23219
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FEC ID number of contributing federal political committee. **C**

Name of Employer HUNTON ANDREWS KURTH LLP	Occupation PARTNER
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10.00

Date of Receipt
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 09 / 30 / 2025

Transaction ID : SA11AI.161808134

Amount of Each Receipt this Period
5.00

Memo Item
HUNTON ANDREWS KURTH LLP: PARTNER

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
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Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	127704.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 120 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS, INC. POLITICAL ACTION COMMITTEE (VERIZON PAC)

Mailing Address 1300 I ST NW, STE 500 EAST
ATTN: TAYLOR CRAIG

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161701396

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
JIM JORDAN FOR CONGRESS

Mailing Address PO BOX 355

City DELAWARE	State OH	Zip Code 43015-0355
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FEC ID number of contributing federal political committee. **C** C00416594

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 04 / 2025

Transaction ID : SA11C.160256689

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DUKE ENERGY CORPORATION PAC

Mailing Address 1301 PENNSYLVANIA AVENUE, NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer	Occupation
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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
09 / 30 / 2025

Transaction ID : SA11C.161807864

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 121 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 400

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 07 / 2025

Transaction ID : SA11C.160372214

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 4250 FAIRFAX DR
STE 600

City ARLINGTON	State VA	Zip Code 22203
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
107996.63

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 18 / 2025

Transaction ID : SA11C.156903842

Amount of Each Receipt this Period
5000.00

Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

C. Full Name (Last, First, Middle Initial)
FRIENDS OF COMMUNITY ONCOLOGY PAC

Mailing Address 760 LYNNHAVEN PARKWAY
SUITE 150

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00383976

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2025

Transaction ID : SA11C.156903869

Amount of Each Receipt this Period
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Memo Item

EARMARKED THROUGH WINRED

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 Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 271	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address 411 NEW JERSEY AVENUE SE

City WASHINGTON	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer	Occupation
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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
09 / 11 / 2025

Transaction ID : SA11C.161267707

Amount of Each Receipt this Period
1000.00

Memo Item
EARMARKED THROUGH WINRED

B. Full Name (Last, First, Middle Initial)
THE MOSAIC COMPANY POLITICAL ACTION COMMITTEE (MOSAICPAC)

Mailing Address 13830 CIRCA CROSSING DRIVE

City LITHIA	State FL	Zip Code 33547
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FEC ID number of contributing federal political committee. **C** C00455766

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 04 / 2025

Transaction ID : SA11C.160257007

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 3200 COURTHOUSE LANE

City EAGAN	State MI	Zip Code 55121
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00034785

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161807875

Amount of Each Receipt this Period
1000.00

Memo Item

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 123 OF 271
(check only one)
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AEROVIRONMENT, INC PAC

Mailing Address 241 18TH STREET SOUTH
SUITE 650

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00797530

Name of Employer Occupation

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
09 / 22 / 2025

Transaction ID : SA11C.161456042

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMEREN CORPORATION FEDERAL POLITICAL ACTION COMMITTEE (AMEREN FEDPAC)

Mailing Address 1331 PENNSYLVANIA AVE., NW
SUITE 550S

City WASHINGTON State DC Zip Code 20004-1710

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161695124

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)

Mailing Address 777 6TH STREET, NW
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 15 / 2025

Transaction ID : SA11C.156793127

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 124 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON	State DC	Zip Code 20036-3971
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 11 / 2025

Transaction ID : SA11C.161230977

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN CAR RENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 584

City LONG LAKE	State NY	Zip Code 12847
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00612010

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
09 / 22 / 2025

Transaction ID : SA11C.161456046

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF CARDIOLOGY PAC (HEARTPAC)

Mailing Address 2400 N ST NW

City WASHINGTON	State DC	Zip Code 20037-1153
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00375360

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2025

Transaction ID : SA11C.161318156

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 125 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC

Mailing Address 20 F ST NW, STE 1000

City: WASHINGTON State: DC Zip Code: 20001

FEC ID number of contributing federal political committee: **C** C00382424

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 07 / 15 / 2025

Transaction ID : SA11C.156793129

Amount of Each Receipt this Period: 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC

Mailing Address 20 F ST NW, STE 1000

City: WASHINGTON State: DC Zip Code: 20001

FEC ID number of contributing federal political committee: **C** C00382424

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 04 / 2025

Transaction ID : SA11C.160256693

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC

Mailing Address 20 F ST NW, STE 1000

City: WASHINGTON State: DC Zip Code: 20001

FEC ID number of contributing federal political committee: **C** C00382424

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 08 / 07 / 2025

Transaction ID : SA11C.160397865

Amount of Each Receipt this Period: - 1000.00

Memo Item
CHARGEBACK

SUBTOTAL of Receipts This Page (optional).....▶ 1000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 400 C STREET, NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer	Occupation
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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
08 / 22 / 2025

Transaction ID : SA11C.160782483

Amount of Each Receipt this Period
2000.00

Memo Item

B. 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
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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
07 / 29 / 2025

Transaction ID : SA11C.160141410

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN SENIORS HOUSING ASSOCIATION (SENIORS HOUSING PAC)

Mailing Address 5225 WISCONSIN AVE., NW
SUITE 500

City WASHINGTON	State DC	Zip Code 20015
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer	Occupation
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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
07 / 29 / 2025

Transaction ID : SA11C.160141411

Amount of Each Receipt this Period
1000.00

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 Page

FOR LINE NUMBER: (check only one)		PAGE 127 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
AMERICAN SUGAR CANE LEAGUE OF USA INC POLITICAL ACTION COMMITTEE

Mailing Address P. O. DRAWER 938

City THIBODAUX	State LA	Zip Code 70302
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00081414

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
07 / 15 / 2025

Transaction ID : SA11C.156793131

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN SUGAR CANE LEAGUE OF USA INC POLITICAL ACTION COMMITTEE

Mailing Address P. O. DRAWER 938

City THIBODAUX	State LA	Zip Code 70302
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00081414

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
07 / 15 / 2025

Transaction ID : SA11C.156793133

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 601 13TH STREET, NW
SUITE 1100 NORTH

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer	Occupation
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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
08 / 04 / 2025

Transaction ID : SA11C.160256691

Amount of Each Receipt this Period
1000.00

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 Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 271	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ANIMAL WELLNESS ACTION PAC

Mailing Address 611 PENNSYLVANIA AVE., SE #136

City WASHINGTON State DC Zip Code 20003

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

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2025

Transaction ID : SA11C.161456048

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 2300 WILSON BLVD. SUITE 300

City ARLINGTON State VA Zip Code 22201-3308

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161807871

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AVIS BUDGET GROUP, INC. PAC

Mailing Address 379 INTERPACE PARKWAY

City PARSIPPANY State NJ Zip Code 07054

FEC ID number of contributing federal political committee. **C** C00335026

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
09 / 22 / 2025

Transaction ID : SA11C.161456049

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
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 OF 271
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL ACTION COMMITTEE)

Mailing Address 675 15TH STREET
SUITE 2900

City DENVER State CO Zip Code 80202

FEC ID number of contributing federal political committee. **C** C00390583

Name of Employer Occupation

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
09 / 30 / 2025

Transaction ID : SA11C.161807867

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BLACKROCK FUNDS SERVICES GROUP LLC POLITICAL ACTION COMMITTEE (BLACKROCK PAC)

Mailing Address 50 HUDSON YARDS

City NEW YORK State NY Zip Code 10001

FEC ID number of contributing federal political committee. **C** C00479246

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
07 / 15 / 2025

Transaction ID : SA11C.156793134

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BLANK ROME PAC

Mailing Address 1825 EYE STREET NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00150797

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161695215

Amount of Each Receipt this Period
1000.00

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 Page

FOR LINE NUMBER: PAGE 130 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BRETTPAC-THE LEADERSHIP PAC OF U.S.REPRESENATIVE BRETT GUTHRIE

Mailing Address 504 DEREK AVENUE

City ELIZABETHTOWN State KY Zip Code 42701-9168

FEC ID number of contributing federal political committee. **C** C00483487

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
08 / 04 / 2025

Transaction ID : SA11C.160256694

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CALIFORNIA DAIRIES, INC. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1127-11TH STREET
SUITE 210

City SACRAMENTO State CA Zip Code 95814

FEC ID number of contributing federal political committee. **C** C00349746

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
09 / 11 / 2025

Transaction ID : SA11C.161232169

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address 5001 EXECUTIVE PARKWAY
ROOM #3W001

City SAN RAMON State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161695521

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 Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 271		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CITIGROUP INC. PAC - FEDERAL (CITI PAC - FEDERAL)

Mailing Address 1101 PENNSYLVANIA AVE NW 12TH FL

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00008474

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
09 / 22 / 2025

Transaction ID : SA11C.161456051

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CITIZENS FOR CANCER AWARENESS FEDERAL PAC

Mailing Address 610 S BOULEVARD

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00455907

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2025

Transaction ID : SA11C.160402706

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CONSTELLATION ENERGY CORPORATION EMPLOYEE POLITICAL ACTION COMMITTEE (CEPAC)

Mailing Address 250 MASSACHUSETTS AVE NW
STE 760

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00793711

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
09 / 30 / 2025

Transaction ID : SA11C.161695593

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 271	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
COX ENTERPRISES PAC (COXPAC) INC.

Mailing Address 975 F STREET NW SUITE 300

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC 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 Y
09 / 12 / 2025

Transaction ID : SA11C.161253916

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DELTA AIR LINES PAC

Mailing Address 601 PENNSYLVANIA AVE NW
SUITE 700 NORTH

City WASHINGTON DC	State WA	Zip Code 20004
-----------------------	-------------	-------------------

FEC 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 Y Y
09 / 30 / 2025

Transaction ID : SA11C.161695633

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DENTONS US LLP PAC

Mailing Address 1301 K STREET NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00216127

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2025

Transaction ID : SA11C.161456052

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
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DOMINION ENERGY, INC. POLITICAL ACTION COMMITTEE - DOMINION PAC

Mailing Address 600 E. CANAL STREET, 8TH FLOOR

City RICHMOND	State VA	Zip Code 23219
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00108209

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161695639

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
DOW INC. PAC (DOWPAC)

Mailing Address 2211 H.H. DOW WAY

City MIDLAND	State MI	Zip Code 48674
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00074096

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
07 / 15 / 2025

Transaction ID : SA11C.156793136

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DROPBOX INC PAC

Mailing Address 28 LIBERTY SHIP WAY
SUITE 2815

City SAUSALITO	State CA	Zip Code 94965
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00695304

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2025

Transaction ID : SA11C.161318317

Amount of Each Receipt this Period
1000.00

Memo Item

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 271		
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
EMD SERONO, INC. POLITICAL ACTION COMMITTEE

Mailing Address ONE TECHNOLOGY PLACE

City ROCKLAND	State MA	Zip Code 02370
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00258236

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161695640

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00088591

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2025

Transaction ID : SA11C.161177366

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ENERGY MARKETERS OF AMERICA SMALL BUSINESS COMMITTEE PAC (EMA SBC PAC)

Mailing Address 300 NEW JERSEY AVENUE
SUITE 924

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035204

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 Y
07 / 29 / 2025

Transaction ID : SA11C.160141412

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 135 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ENERGY CORPORATION EMPLOYEE POLITICAL ACTION COMMITTEE (ENPAC)

Mailing Address 425 WEST CAPITOL AVENUE
STE24B

City LITTLE ROCK State AR Zip Code 72201

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161695662

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ENTERPRISE HOLDINGS, INC. / ENTERPRISE MOBILITY POLITICAL ACTION COMMITTEE

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105

FEC ID number of contributing federal political committee. **C** C00219642

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 11 / 2025

Transaction ID : SA11C.160432308

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
FLORIDA FRUIT & VEGETABLE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 800 TRAFALGAR COURT
SUITE 200

City MAITLAND State FL Zip Code 32751

FEC ID number of contributing federal political committee. **C** C00232967

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 11 / 2025

Transaction ID : SA11C.161231952

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 136 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
FOX CORPORATION POLITICAL ACTION COMMITTEE (FOX PAC)

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 200 WEST

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00693002

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2025

Transaction ID : SA11C.161177334

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GENERAL DYNAMICS EMPLOYEE PAC)

Mailing Address 11011 SUNSET HILLS ROAD

City RESTON	State VA	Zip Code 20190
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer	Occupation
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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
09 / 09 / 2025

Transaction ID : SA11C.161177335

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GOOGLE LLC NETPAC

Mailing Address 25 MASSACHUSETTS AVE. NW
9TH FLOOR

City WASHINGTON	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer	Occupation
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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
08 / 11 / 2025

Transaction ID : SA11C.160432309

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 137 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
HEALTH & FITNESS ASSOCIATION PAC (FITPAC)

Mailing Address 70 FARGO STREET

City BOSTON	State MA	Zip Code 02210
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00335257

Name of Employer	Occupation
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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
09 / 30 / 2025

Transaction ID : SA11C.161697362

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HOUSE CONSERVATIVES FUND

Mailing Address 228 S. WASHINGTON ST., STE. 115

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00326439

Name of Employer	Occupation
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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
08 / 04 / 2025

Transaction ID : SA11C.160256696

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HUMANE WORLD ACTION FUND POLITICAL ACTION COMMITTEE

Mailing Address 1255 23RD STREET, NW
SUITE 455

City WASHINGTON	State DC	Zip Code 20037
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00466813

Name of Employer	Occupation
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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
09 / 16 / 2025

Transaction ID : SA11C.161318321

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	6500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 138 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL TRADEMARK ASSOCIATION POLITICAL ACTION COMMITTEE (INTA PAC)

Mailing Address 675 THIRD AVENUE
FLOOR 3

City NEW YORK State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00348243

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 23 / 2025

Transaction ID : SA11C.161592608

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)

Mailing Address 1601 K STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2025

Transaction ID : SA11C.161318318

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LIQUID ENERGY PIPELINE ASSOCIATION PAC

Mailing Address 900 17TH STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00486779

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 18 / 2025

Transaction ID : SA11C.160601154

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 139 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00303024

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
08 / 07 / 2025

Transaction ID : SA11C.160372215

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00303024

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
09 / 30 / 2025

Transaction ID : SA11C.161701766

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A - FEDERAL ONLY

Mailing Address 200 PARK AVENUE

City NEW YORK	State NY	Zip Code 10166
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FEC ID number of contributing federal political committee. **C** C00493551

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 02 / 2025

Transaction ID : SA11C.160944563

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 140 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161807862

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BENEFITS AND INSURANCE PROFESSIONALS PAC (NABIP PAC)

Mailing Address 999 E STREET, NW
SUITE 400

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00283135

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
09 / 26 / 2025

Transaction ID : SA11C.161595342

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1201 PENNSYLVANIA AVENUE, NW
12TH FLOOR

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00113811

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
09 / 22 / 2025

Transaction ID : SA11C.161456055

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 271	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2025

Transaction ID : SA11C.161318320

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION AMERICA'S ELECTRIC COOPERATIVES PAC

Mailing Address 4301 WILSON BLVD

City ARLINGTON	State VA	Zip Code 22203
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FEC ID number of contributing federal political committee. **C** C00002972

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 22 / 2025

Transaction ID : SA11C.157198017

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NEWS CORPORATION POLITICAL ACTION COMMITTEE (NEWS CORP PAC)

Mailing Address 1211 AVENUE OF THE AMERICAS
C/O NEWS CORPORATION

City NEW YORK	State NY	Zip Code 10036
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00546101

Name of Employer	Occupation
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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
07 / 29 / 2025

Transaction ID : SA11C.160141413

Amount of Each Receipt this Period
1000.00

Memo Item

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 142 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)

Mailing Address 1550 LIBERTY RIDGE DRIVE
SUITE 115

City WAYNE State PA Zip Code 19087

FEC ID number of contributing federal political committee. **C** C00562546

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
08 / 04 / 2025

Transaction ID : SA11C.160256695

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1201 F ST NW
SUITE 1100

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00239848

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161807860

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PINNACLE WEST CAPITAL CORPORATION PAC

Mailing Address PO BOX 53999
MS 9505

City PHOENIX State AZ Zip Code 85072-2680

FEC ID number of contributing federal political committee. **C** C00015933

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA11C.161807691

Amount of Each Receipt this Period
1000.00

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 Page

FOR LINE NUMBER: (check only one)		PAGE 143 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
POL SINELLI PAC

Mailing Address 900 W. 48TH PLACE
SUITE 900

City KANSAS CITY	State MO	Zip Code 64112
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FEC ID number of contributing federal political committee. **C** C00445981

Name of Employer	Occupation
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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
09 / 30 / 2025

Transaction ID : SA11C.161697365

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
POWERPAC OF THE EDISON ELECTRIC INSTITUTE

Mailing Address 701 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00095869

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
09 / 30 / 2025

Transaction ID : SA11C.161716604

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 655 NEW YORK AVE NW
SUITE 1100

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00107235

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
09 / 30 / 2025

Transaction ID : SA11C.161701399

Amount of Each Receipt this Period
2500.00

Memo Item

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 144 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
REPUBLICAN GOVERNANCE GROUP/TUESDAY GROUP PAC

Mailing Address 610 S. BOULEVARD

City TAMPA	State FL	Zip Code 33606
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FEC ID number of contributing federal political committee. **C** C00433060

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
09 / 30 / 2025

Transaction ID : SA11C.161719864

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
REPUBLICAN GOVERNANCE GROUP/TUESDAY GROUP PAC

Mailing Address 610 S. BOULEVARD

City TAMPA	State FL	Zip Code 33606
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FEC ID number of contributing federal political committee. **C** C00433060

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
08 / 07 / 2025

Transaction ID : SA11C.160372209

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address PO BOX 23219

City JEFFERSON	State LA	Zip Code 70183
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FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer	Occupation
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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
09 / 11 / 2025

Transaction ID : SA11C.161231180

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 145 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
SONY PICTURES ENTERTAINMENT, INC. PAC

Mailing Address 10202 W. WASHINGTON BLVD.

City: CULVER CITY State: CA Zip Code: 90232

FEC ID number of contributing federal political committee: **C** C00282038

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 08 / 18 / 2025

Transaction ID : SA11C.160601155

Amount of Each Receipt this Period: 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Mailing Address P O BOX 500

City: RENVILLE State: MN Zip Code: 56284

FEC ID number of contributing federal political committee: **C** C00166348

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 08 / 04 / 2025

Transaction ID : SA11C.160257008

Amount of Each Receipt this Period: 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE ASCAP LEGISLATIVE FUND FOR THE ARTS

Mailing Address 250 WEST 57TH STREET

City: NEW YORK State: NY Zip Code: 10107

FEC ID number of contributing federal political committee: **C** C00228296

Name of Employer: Occupation:

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt: 09 / 30 / 2025

Transaction ID : SA11C.161695210

Amount of Each Receipt this Period: 1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 271	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 02229
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FEC ID number of contributing federal political committee. **C** C00467431

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 11 / 2025

Transaction ID : SA11C.161231987

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THE GOOD FUND

Mailing Address 5341 FOX RIDGE ROAD

City ROANOKE	State VA	Zip Code 24018
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FEC ID number of contributing federal political committee. **C** C00257956

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

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
09 / 22 / 2025

Transaction ID : SA11C.161456057

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE NIELSEN COMPANY (US), LLC FEDERAL POLITICAL ACTION COMMITTEE (NIELSEN PAC)

Mailing Address 675 6TH AVE

City NEW YORK	State NY	Zip Code 10011
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00521328

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

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
07 / 15 / 2025

Transaction ID : SA11C.156793138

Amount of Each Receipt this Period
500.00

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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FOR LINE NUMBER: PAGE 147 OF 271
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
T-MOBILE US, INC. POLITICAL ACTION COMMITTEE (T-PAC)

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 800 NORTH BLDG.

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

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 Y
08 / 18 / 2025

Transaction ID : SA11C.160601156

Amount of Each Receipt this Period
3500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
T-MOBILE US, INC. POLITICAL ACTION COMMITTEE (T-PAC)

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 800 NORTH BLDG.

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

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 Y
08 / 18 / 2025

Transaction ID : SA11C.160601156

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA, INC POLITICAL ACTION COMMITTEE (TOYOTA/LEXUS PAC)

Mailing Address 325 7TH STREET, NW, SUITE 1000

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00542365

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 05 / 2025

Transaction ID : SA11C.160260565

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 148 OF 271	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716-0150
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 18 / 2025

Transaction ID : SA11C.160601158

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
XCEL ENERGY EMPLOYEE POLITICAL ACTION COMMITTEE (XPAC)

Mailing Address 701 PENNSYLVANIA AVE NW
SUITE 250

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00107771

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2025

Transaction ID : SA11C.161456059

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

2000.00
127000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 149 OF 271
(check only one)
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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
EMMER MAJORITY BUILDERS

Mailing Address 824 S. MILLEDGE AVE. STE. 101

City ATHENS	State GA	Zip Code 30605
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00859058

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
23629.40

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA12.161716178

Amount of Each Receipt this Period
14725.99

Memo Item
JFC TRANSFER: SEE ATTRIBUTION(S)

B. Full Name (Last, First, Middle Initial)
AUSTIN, TANI, DRU, ,

Mailing Address 5563 RUSTIC MANOR DR

City BROWNSVILLE	State TX	Zip Code 78526
---------------------	-------------	-------------------

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

Name of Employer STARKEY HEARING TECHNOLOGIES	Occupation EXECUTIVE
--	-------------------------

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
09 / 26 / 2025

Transaction ID : SA12.161879365

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

C. Full Name (Last, First, Middle Initial)
AUSTIN, WILLIAM, F, ,

Mailing Address 5563 RUSTIC MANOR DR

City BROWNSVILLE	State TX	Zip Code 78526
---------------------	-------------	-------------------

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

Name of Employer STARKEY HEARING TECHNOLOGIES	Occupation EXECUTIVE
--	-------------------------

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
09 / 26 / 2025

Transaction ID : SA12.161879364

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

SUBTOTAL of Receipts This Page (optional).....▶	14725.99
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 150 OF 271
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BLATTNER, JOHN, S, ,

Mailing Address 32277 NOB HILL DR

City AVON State MN Zip Code 56310

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 ▼
565.22

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 25 / 2025

Transaction ID : SA12.161879354

Amount of Each Receipt this Period
565.22

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

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

Mailing Address 829 PARK AVE
APT 5B

City NEW YORK State NY Zip Code 10021

FEC ID number of contributing federal political committee. C

Name of Employer KIRKLAND AND ELLIS Occupation PARTNER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
565.22

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2025

Transaction ID : SA12.161879361

Amount of Each Receipt this Period
565.22

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

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

Mailing Address 1609 BREAKWATER LN

City PLANO State TX Zip Code 75093

FEC ID number of contributing federal political committee. C

Name of Employer DILLON GAGE Occupation CFO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
595.24

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2025

Transaction ID : SA12.161879356

Amount of Each Receipt this Period
595.24

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

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 Page

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<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)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
HILL, LOUIS, F, ,

Mailing Address 1315 RED FOX RD
STE 200

City SAINT PAUL	State MN	Zip Code 55112
--------------------	-------------	-------------------

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

Name of Employer ROCKWOOD CAPITAL MANAGEMENT	Occupation CHAIRMAN
---	------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
541.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : SA12.161879359

Amount of Each Receipt this Period
541.67

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

B. Full Name (Last, First, Middle Initial)
KIDAN, ADAM, R, ,

Mailing Address 5712 GAUGUIN TER

City PALM BEACH GARDENS	State FL	Zip Code 33418
----------------------------	-------------	-------------------

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

Name of Employer ATLANTIC SOLUTIONS GROUP	Occupation EXECUTIVE
--	-------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1271.79

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2025

Transaction ID : SA12.161879362

Amount of Each Receipt this Period
1271.79

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS
IN-KIND: EVENT CATERING AND FACILITY RENTAL

C. Full Name (Last, First, Middle Initial)
OREN, DONALD, G, ,

Mailing Address 3105 SANDY HOOK DR

City ROSEVILLE	State MN	Zip Code 55113
-------------------	-------------	-------------------

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

Name of Employer DART TRANSIT CO	Occupation OWNER
-------------------------------------	---------------------

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 Y
08 / 25 / 2025

Transaction ID : SA12.161879355

Amount of Each Receipt this Period
750.00

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

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)
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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
PETERFFY, THOMAS, , ,

Mailing Address 1255 S OCEAN BLVD

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer INTERACTIVE BROKERS	Occupation OWNER
---	---------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879360

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: EMMER MAJORITY BUILDERS

B. Full Name (Last, First, Middle Initial)
ROCHE, KEVIN, H, ,

Mailing Address 6301 WESTWOOD CT

City EDINA	State MN	Zip Code 55436
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer ROCHE CONSULTING LLC	Occupation PRESIDENT
--	-------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879358

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: EMMER MAJORITY BUILDERS

C. Full Name (Last, First, Middle Initial)
ROSEN, THOMAS, J, ,

Mailing Address PO BOX 933

City FAIRMONT	State MN	Zip Code 56031
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer ROSEN DIVERSIFIED	Occupation CEO
---------------------------------------	-------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879363

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: EMMER MAJORITY BUILDERS

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
EMMER MAJORITY BUILDERS

Mailing Address 824 S. MILLEDGE AVE. STE. 101

City ATHENS	State GA	Zip Code 30605
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00859058

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
23629.40

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA12.161716618

Amount of Each Receipt this Period
8903.41

Memo Item
JFC TRANSFER: SEE ATTRIBUTION(S)

B. Full Name (Last, First, Middle Initial)
AUSTIN, TANI, DRU, ,

Mailing Address 5563 RUSTIC MANOR DR

City BROWNSVILLE	State TX	Zip Code 78526
---------------------	-------------	-------------------

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

Name of Employer STARKEY HEARING TECHNOLOGIES	Occupation EXECUTIVE
--	-------------------------

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
09 / 26 / 2025

Transaction ID : SA12.161879369

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

C. Full Name (Last, First, Middle Initial)
AUSTIN, WILLIAM, F, ,

Mailing Address 5563 RUSTIC MANOR DR

City BROWNSVILLE	State TX	Zip Code 78526
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FEC ID number of contributing federal political committee. **C**

Name of Employer STARKEY HEARING TECHNOLOGIES	Occupation EXECUTIVE
--	-------------------------

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
09 / 26 / 2025

Transaction ID : SA12.161879368

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

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

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

8903.41

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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for each category of the
Detailed Summary Page

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
PETERFFY, THOMAS, , ,

Mailing Address 1255 S OCEAN BLVD

City PALM BEACH	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

Name of Employer INTERACTIVE BROKERS	Occupation OWNER
---	---------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : SA12.161879366

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

B. Full Name (Last, First, Middle Initial)
ROSEN, THOMAS, J, ,

Mailing Address PO BOX 933

City FAIRMONT	State MN	Zip Code 56031
------------------	-------------	-------------------

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

Name of Employer ROSEN DIVERSIFIED	Occupation CEO
---------------------------------------	-------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3666.67

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2025

Transaction ID : SA12.161879367

Amount of Each Receipt this Period
166.67

Memo Item
JFC TRANSFER: EMMER MAJORITY BUILDERS

C. Full Name (Last, First, Middle Initial)
LAUREL LEE VICTORY FUND

Mailing Address 16350 BRUCE B. DOWNS BLVD
P.O. BOX 47556

City TAMPA	State FL	Zip Code 33647
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00826230

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
333112.38

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA12.161778378

Amount of Each Receipt this Period
51079.10

Memo Item
JFC TRANSFER: SEE ATTRIBUTION(S)

SUBTOTAL of Receipts This Page (optional).....▶	51079.10
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)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ALFONSO, CARLOS, , ,

Mailing Address 2913 W HARBOR VIEW AVE

City TAMPA	State FL	Zip Code 33611
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer ALLIANT PARTNERS DEVELOPMENT	Occupation REAL ESTATE
--	---------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879139

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 1214 W CASS ST

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer FARM-ED	Occupation CEO
-----------------------------	-------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879110

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 19612 SW 69TH PLACE

City FORT LAUDERDALE	State FL	Zip Code 33332
-------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879140

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="0.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
BERNSTEIN, STEVEN, , ,

Mailing Address 608 S ORLEANS AVE

City TAMPA State FL Zip Code 33606

FEC ID number of contributing federal political committee. C

Name of Employer FISHER PHILLIPS Occupation ATTORNEY

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2025

Transaction ID : SA12.161879137

Amount of Each Receipt this Period
500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 555 PALM HARBOR BLVD

City PALM HARBOR State FL Zip Code 34683

FEC ID number of contributing federal political committee. C

Name of Employer BRANDON CONSTRUCTION Occupation GENERAL CONTRACTOR

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2025

Transaction ID : SA12.161879114

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 3213 W PARKLAND BLVD

City TAMPA State FL Zip Code 33609

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 ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2025

Transaction ID : SA12.161879123

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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)
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(check only one)
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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CELESTAN, GREGORY, , ,

Mailing Address 2816 N JEFFERSON ST

City TAMPA State FL Zip Code 33602

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

Name of Employer CELESTAR CORPORATION Occupation CEO

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
09 / 23 / 2025

Transaction ID : SA12.161879126

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 2924 W VILLA ROSA PARK

City TAMPA State FL Zip Code 33611

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
09 / 26 / 2025

Transaction ID : SA12.161879136

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 3618 S RENELLIE DR

City TAMPA State FL Zip Code 33629

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

Name of Employer HOLTEC USA CORP Occupation DIRECTOR

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
09 / 25 / 2025

Transaction ID : SA12.161879127

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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 Page

FOR LINE NUMBER: PAGE 158 OF 271
(check only one)
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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
DOWNS, DANIEL, , ,

Mailing Address 18503 AMBLY LN

City TAMPA State FL Zip Code 33647

FEC ID number of contributing federal political committee. C

Name of Employer THE CANADIAN MEDSTORE Occupation REGIONAL DIRECTOR

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
09 / 26 / 2025

Transaction ID : SA12.161879132

Amount of Each Receipt this Period
500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 4420 W SEVILLA ST

City TAMPA State FL Zip Code 33629

FEC ID number of contributing federal political committee. C

Name of Employer FERMAN AUTOMOTIVE Occupation SALES MGR

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
09 / 23 / 2025

Transaction ID : SA12.161879125

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 1023 MANATEE AVE W

City BRADENTON State FL Zip Code 34205

FEC ID number of contributing federal political committee. C

Name of Employer GRIMES GALVANO Occupation ATTORNEY

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 22 / 2025

Transaction ID : SA12.161879121

Amount of Each Receipt this Period
2500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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 Page

FOR LINE NUMBER: (check only one)		PAGE 159 OF 271	
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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)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
GALVANO, BILL, , ,

Mailing Address 1023 MANATEE AVE W

City BRADENTON	State FL	Zip Code 34205
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer GRIMES GALVANO	Occupation ATTORNEY
------------------------------------	------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879122

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 1401 N WEST SHORE BLVD

City TAMPA	State FL	Zip Code 33607
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer HERITAGE INSURANCE	Occupation EXECUTIVE
--	-------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879116

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 50 CENTRAL AVE
STE 980

City SARASOTA	State FL	Zip Code 34236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer MONEYSHOW	Occupation CHIEF EXECUTIVE OFFICER
-------------------------------	---------------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879104

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 271
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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
GOBUTY, MARSHALL, , ,

Mailing Address 35 WATERGATE DR
STE 806

City SARASOTA	State FL	Zip Code 34236
------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer PEARL HOMES	Occupation DEVELOPER
---------------------------------	-------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879119

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 4220 W CORONA ST

City TAMPA	State FL	Zip Code 33629
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer SAVILLS	Occupation COMMERCIAL REAL ESTATE
-----------------------------	--------------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879100

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 13717 CANTERFIELD DR

City RIVERVIEW	State FL	Zip Code 33579
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FEC ID number of contributing federal political committee.

Name of Employer TRANSCEND DEVELOPMENT	Occupation DEVELOPER
---	-------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879115

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
JEFFRIES, COLE, , ,

Mailing Address 2501 W MORRISON AVE

City TAMPA State FL Zip Code 33629

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 ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA12.161879141

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 5343 NATHANIEL PL

City SARASOTA State FL Zip Code 34233

FEC ID number of contributing federal political committee. C

Name of Employer SARASOTA DENTAL GROUP Occupation DENTIST

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
08 / 14 / 2025

Transaction ID : SA12.161879113

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 4800 OCEAN BLVD

City SARASOTA State FL Zip Code 34242

FEC ID number of contributing federal political committee. C

Name of Employer CLAIMS QUESTIONS LLC Occupation INSURANCE

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
08 / 21 / 2025

Transaction ID : SA12.161879120

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
KOENIG, KEITH, , ,

Mailing Address 6701 N HIATUS RD

City TAMARAC State FL Zip Code 33321

FEC ID number of contributing federal political committee.

Name of Employer CITY FURNITURE Occupation CHAIRMAN

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 06 / 2025

Transaction ID : SA12.161879107

Amount of Each Receipt this Period

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 4054 SAWYER ROAD

City SARASOTA State FL Zip Code 34233

FEC ID number of contributing federal political committee.

Name of Employer DSR Occupation MANAGER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 23 / 2025

Transaction ID : SA12.161879124

Amount of Each Receipt this Period

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 155 S COURT AVE

City ORLANDO State FL Zip Code 32801

FEC ID number of contributing federal political committee.

Name of Employer THE CANADIAN MEDSTORE Occupation PHARMACIST

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 26 / 2025

Transaction ID : SA12.161879133

Amount of Each Receipt this Period

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
LLOYD, ROBERT, , ,

Mailing Address 6210 SHORELINE DR

City PORT ORANGE State FL Zip Code 32127

FEC ID number of contributing federal political committee.

Name of Employer LLOYD LAW PLLC Occupation CONSULTANT

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA12.161879112

Amount of Each Receipt this Period

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address PO BOX 2276

City DADE CITY State FL Zip Code 33526

FEC ID number of contributing federal political committee.

Name of Employer SHUMAKER LOOP KENDRICK LLP Occupation ATTORNEY AT LAW

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA12.161879105

Amount of Each Receipt this Period

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 3827 FLAMINGO AVENUE

City SARASOTA State FL Zip Code 34242

FEC ID number of contributing federal political committee.

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA12.161879101

Amount of Each Receipt this Period

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

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

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MCGILLICUDDY, GRACIELA, S, ,

Mailing Address 3827 FLAMINGO AVE

City SARASOTA State FL Zip Code 34242

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 04 / 2025

Transaction ID : SA12.161879102

Amount of Each Receipt this Period
2500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 101 E KENNEDY BLVD
FL 28

City TAMPA State FL Zip Code 33602

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SHUMAKER ADVISORS CONSULTANT

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
08 / 07 / 2025

Transaction ID : SA12.161879108

Amount of Each Receipt this Period
500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 1375 SAUTERN DR

City FORT MYERS State FL Zip Code 33919

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
CAN COMMUNITY HEALTH PRESIDENT CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 05 / 2025

Transaction ID : SA12.161879106

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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)
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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
PENIN, CARLOS, , ,

Mailing Address 343 ALMERIA AVE

City: CORAL GABLES State: FL Zip Code: 33134

FEC ID number of contributing federal political committee: C

Name of Employer: CAP ENGINEERING INC Occupation: ENGINEER

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA12.161879142

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 101 RIVERFRONT BLVD

City: BRADENTON State: FL Zip Code: 33578

FEC ID number of contributing federal political committee: C

Name of Employer: MCR HEALTH Occupation: PRESIDENT AND CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 26 / 2025

Transaction ID : SA12.161879128

Amount of Each Receipt this Period
- 1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 101 RIVERFRONT BLVD

City: BRADENTON State: FL Zip Code: 33578

FEC ID number of contributing federal political committee: C

Name of Employer: MCR HEALTH Occupation: PRESIDENT AND CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 20 / 2025

Transaction ID : SA12.161879118

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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 Page

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(check only one)
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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
PRICE, MELVIN, , ,

Mailing Address 101 RIVERFRONT BLVD

City BRADENTON State FL Zip Code 34205

FEC ID number of contributing federal political committee. C

Name of Employer MCR HEALTH Occupation PRESIDENT AND CEO

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2025

Transaction ID : SA12.161879138

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 20025 BURT RD

City DETROIT State MI Zip Code 48219

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation EMPLOYEE BENEFIT CONSULTANT

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
09 / 26 / 2025

Transaction ID : SA12.161879134

Amount of Each Receipt this Period
250.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 541 NORSOTA WAY

City SARASOTA State FL Zip Code 34242

FEC ID number of contributing federal political committee. C

Name of Employer SELF Occupation PRIVATE INVESTOR

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 04 / 2025

Transaction ID : SA12.161879103

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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 Page

FOR LINE NUMBER: PAGE 167 OF 271
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
SAUNDERS, THOMAS, , ,

Mailing Address 2341 HAITIAN DR

City CLEARWATER State FL Zip Code 33763

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

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
09 / 26 / 2025

Transaction ID : SA12.161879135

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 1175 51ST ST W

City BRADENTON State FL Zip Code 34209

FEC ID number of contributing federal political committee. C

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 11 / 2025

Transaction ID : SA12.161879111

Amount of Each Receipt this Period
1000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 934 GUI SANDO DE AVILA

City TAMPA State FL Zip Code 33613

FEC ID number of contributing federal political committee. C

Name of Employer LEVERAGE Occupation MARKETING EXECUTIVE

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
08 / 07 / 2025

Transaction ID : SA12.161879109

Amount of Each Receipt this Period
500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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 Page

FOR LINE NUMBER: PAGE 168 OF 271
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
VAN VOORST, RICHARD, , ,

Mailing Address 13911 CHERRY CREEK DR

City TAMPA State FL Zip Code 33618

FEC ID number of contributing federal political committee. C

Name of Employer ACHRAM LABS Occupation DEFENSE CONTRACTOR

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
08 / 17 / 2025

Transaction ID : SA12.161879117

Amount of Each Receipt this Period
2000.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

B. Full Name (Last, First, Middle Initial)
LAUREL LEE VICTORY FUND

Mailing Address 16350 BRUCE B. DOWNS BLVD
P.O. BOX 47556

City TAMPA State FL Zip Code 33647

FEC ID number of contributing federal political committee. C C00826230

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
333112.38

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2025

Transaction ID : SA12.161778379

Amount of Each Receipt this Period
24295.46

Memo Item
JFC TRANSFER: SEE ATTRIBUTION(S)

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

Mailing Address 3304 WESTMORELAND DR

City TAMPA State FL Zip Code 33618

FEC ID number of contributing federal political committee. C

Name of Employer MYGUARD LLC Occupation CFO

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 / 15 / 2025

Transaction ID : SA12.161879143

Amount of Each Receipt this Period
3500.00

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶ 24295.46

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 169 OF 271
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
ALFONSO, CARLOS, , ,

Mailing Address 2913 W HARBOR VIEW AVE

City TAMPA	State FL	Zip Code 33611
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer ALLIANT PARTNERS DEVELOPMENT	Occupation REAL ESTATE
--	---------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879155

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 1214 W CASS ST

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer FARM-ED	Occupation CEO
-----------------------------	-------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879147

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 3213 W PARKLAND BLVD

City TAMPA	State FL	Zip Code 33609
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879149

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="0.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 170 OF 271
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
CELESTAN, GREGORY, , ,

Mailing Address 2816 N JEFFERSON ST

City TAMPA	State FL	Zip Code 33602
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer CELESTAR CORPORATION	Occupation CEO
--	-------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879151

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 2924 W VILLA ROSA PARK

City TAMPA	State FL	Zip Code 33611
---------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879154

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 3618 S RENELLIE DR

City TAMPA	State FL	Zip Code 33629
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FEC ID number of contributing federal political committee.

Name of Employer HOLTEC USA CORP	Occupation DIRECTOR
-------------------------------------	------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879152

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 171 OF 271
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
FARRIOR, PRESTON, , ,

Mailing Address 4420 W SEVILLA ST

City TAMPA State FL Zip Code 33629

FEC ID number of contributing federal political committee.

Name of Employer FERMAN AUTOMOTIVE Occupation SALES MGR

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 23 / 2025

Transaction ID : SA12.161879150

Amount of Each Receipt this Period

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 1401 N WEST SHORE BLVD

City TAMPA State FL Zip Code 33607

FEC ID number of contributing federal political committee.

Name of Employer HERITAGE INSURANCE Occupation EXECUTIVE

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 16 / 2025

Transaction ID : SA12.161879148

Amount of Each Receipt this Period

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 6701 N HIATUS RD

City TAMARAC State FL Zip Code 33321

FEC ID number of contributing federal political committee.

Name of Employer CITY FURNITURE Occupation CHAIRMAN

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 06 / 2025

Transaction ID : SA12.161879146

Amount of Each Receipt this Period

Memo Item
JFC TRANSFER: LAUREL LEE VICTORY FUND

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 271
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <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)
LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial)
MCGILLICUDDY, GRACIELA, S, ,

Mailing Address 3827 FLAMINGO AVE

City SARASOTA	State FL	Zip Code 34242
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FEC ID number of contributing federal political committee.

Name of Employer HOMEMAKER	Occupation HOMEMAKER
-------------------------------	-------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879144

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 2341 HAITIAN DR

City CLEARWATER	State FL	Zip Code 33763
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FEC ID number of contributing federal political committee.

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879153

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

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

Mailing Address 9676 DEER VALLEY DR

City TALLAHASSEE	State FL	Zip Code 32312
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FEC ID number of contributing federal political committee.

Name of Employer SHUMAKER	Occupation CONSULTANT
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA12.161879145

Amount of Each Receipt this Period

Memo Item
 JFC TRANSFER: LAUREL LEE VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="99003.96"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 173 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AAIM CONSULTING SERVICES, LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2025	
Mailing Address PO BOX 2244			FEC Identification Number C	
City VALRICO	State FL	Zip Code 33595	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type	Transaction ID : SB17.1072862	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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. AAIM CONSULTING SERVICES, LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2025	
Mailing Address PO BOX 2244			FEC Identification Number C	
City VALRICO	State FL	Zip Code 33595	Amount of Each Disbursement this Period 2544.74	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type	Transaction ID : SB17.1084114	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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. AAIM CONSULTING SERVICES, LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2025	
Mailing Address PO BOX 2244			FEC Identification Number C	
City VALRICO	State FL	Zip Code 33595	Amount of Each Disbursement this Period 3532.00	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type	Transaction ID : SB17.1078249	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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).....▶	8076.74
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 Page	FOR LINE NUMBER: (check only one)		PAGE 174 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ADAMS, NICHOLAS, , ,			Date of Disbursement MM / DD / YYYY 08 / 29 / 2025	
Mailing Address 150 D STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/ Type	Transaction ID : SB17.1082060	
Candidate Name			<input type="checkbox"/> 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. ADAMS, NICHOLAS, , ,			Date of Disbursement MM / DD / YYYY 08 / 01 / 2025	
Mailing Address 150 D STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/ Type	Transaction ID : SB17.1076714	
Candidate Name			<input type="checkbox"/> 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. ADAMS, NICHOLAS, , ,			Date of Disbursement MM / DD / YYYY 07 / 09 / 2025	
Mailing Address 150 D STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/ Type	Transaction ID : SB17.1072887	
Candidate Name			<input type="checkbox"/> 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).....▶	2000.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 175 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Amount of Each Disbursement this Period 49.95
Candidate Name		Transaction ID : SB17.1082069
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Amount of Each Disbursement this Period 49.95
Candidate Name		Transaction ID : SB17.1078128
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Amount of Each Disbursement this Period 49.95
Candidate Name		Transaction ID : SB17.1087964
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	149.85
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 176 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2025
Mailing Address 200 VESEY ST		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement CREDIT CARD PAYMENT: SEE ITEMIZED IF REQUIRED		Amount of Each Disbursement this Period 17196.82
Candidate Name		Transaction ID : SB17.1082064
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. 2&2 RESTAURANT AMERICAN DINERS		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2025
Mailing Address 33835 WESLEY CHAPEL BLVD		FEC Identification Number C
City WESLEY CHAPEL	State FL	Zip Code 33543
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 36.72
Candidate Name		Transaction ID : SB17.1082064.1
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. 2&2 RESTAURANT AMERICAN DINERS		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2025
Mailing Address 33835 WESLEY CHAPEL BLVD		FEC Identification Number C
City WESLEY CHAPEL	State FL	Zip Code 33543
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 149.27
Candidate Name		Transaction ID : SB17.1082064.2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	17196.82
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 177 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ALAMO		Date of Disbursement M M / D D / Y Y Y Y 08 / 16 / 2025
Mailing Address 1805 E SKY HARBOR CIR S		FEC Identification Number C
City PHOENIX	State AZ	Zip Code 85034
Purpose of Disbursement TOLL FEE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 6.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1082064.3
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. ALAMO		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2025
Mailing Address 5405 AIRPORT SERVICE RD		FEC Identification Number C
City TAMPA	State FL	Zip Code 33607
Purpose of Disbursement TRAVEL: CAR RENTAL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 440.58	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1082064.4
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ALAMO		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2025
Mailing Address 5405 AIRPORT SERVICE RD		FEC Identification Number C
City TAMPA	State FL	Zip Code 33607
Purpose of Disbursement TRAVEL: CAR RENTAL	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 681.46	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1082064.5
State: District:	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 178 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ALAMO			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2025	
Mailing Address 5405 AIRPORT SERVICE RD			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33607	Amount of Each Disbursement this Period 231.08	
Purpose of Disbursement TRAVEL: CAR RENTAL		Category/ Type	Transaction ID : SB17.1082064.6	
Candidate Name		<input checked="" type="checkbox"/> 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. ALLIANZ			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2025	
Mailing Address 9950 MAYLAND DR			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23233	Amount of Each Disbursement this Period 62.71	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type	Transaction ID : SB17.1082064.7	
Candidate Name		<input checked="" type="checkbox"/> 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. ALLIANZ			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2025	
Mailing Address 9950 MAYLAND DR			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23233	Amount of Each Disbursement this Period 12.00	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type	Transaction ID : SB17.1082064.8	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 179 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ALLIANZ			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2025	
Mailing Address 9950 MAYLAND DR			FEC Identification Number C	
City RICHMOND	State VA	Zip Code 23233	Amount of Each Disbursement this Period 21.00	
Purpose of Disbursement TRAVEL INSURANCE		Category/ Type	Transaction ID : SB17.1082064.9	
Candidate Name		<input checked="" type="checkbox"/> 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 AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2025	
Mailing Address 4255 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 760.96	
Purpose of Disbursement TRAVEL: AIR		Category/ Type	Transaction ID : SB17.1082064.10	
Candidate Name		<input checked="" type="checkbox"/> 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. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2025	
Mailing Address 4255 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 37.88	
Purpose of Disbursement TRAVEL: AIR		Category/ Type	Transaction ID : SB17.1082064.11	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 180 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Amount of Each Disbursement this Period 217.18
Candidate Name		Transaction ID : SB17.1082064.12
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Amount of Each Disbursement this Period 217.18
Candidate Name		Transaction ID : SB17.1082064.13
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement TRAVEL: AIR		Amount of Each Disbursement this Period 488.19
Candidate Name		Transaction ID : SB17.1082064.14
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> 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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR Category/Type

Candidate Name

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement: 08 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 478.19

Transaction ID : SB17.1082064.15

Memo Item

B. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR Category/Type

Candidate Name

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement: 08 / 23 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 307.49

Transaction ID : SB17.1082064.16

Memo Item

C. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)
Mailing Address 4255 AMON CARTER BLVD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL: AIR Category/Type

Candidate Name

Office Sought: House Disbursement For: 2026
 Senate Primary General
 President Other (specify) ▼

State: District:

Date of Disbursement: 08 / 27 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 9.00

Transaction ID : SB17.1082064.17

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 Page	FOR LINE NUMBER: (check only one)		PAGE 182 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN SOCIAL			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2025	
Mailing Address 601 S HARBOUR ISLAND BLVD #107			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 69.66	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.19	
Candidate Name		<input checked="" type="checkbox"/> 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 SOCIAL			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2025	
Mailing Address 601 S HARBOUR ISLAND BLVD #107			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 150.37	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.20	
Candidate Name		<input checked="" type="checkbox"/> 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. AMERICAN SOCIAL			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2025	
Mailing Address 601 S HARBOUR ISLAND BLVD #107			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 101.53	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.21	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 183 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN SOCIAL			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2025	
Mailing Address 601 S HARBOUR ISLAND BLVD #107			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 31.87	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.22	
Candidate Name		<input checked="" type="checkbox"/> 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. ANCHOR TAVERN			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2025	
Mailing Address 514 N FRANKLIN ST			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 111.75	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.23	
Candidate Name		<input checked="" type="checkbox"/> 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. APPLE			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2025	
Mailing Address 1 APPLE PARK WAY			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 8.49	
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Category/ Type	Transaction ID : SB17.1082064.24	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 184 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. BULLFEATHERS ON THE HILL		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2025
Mailing Address 410 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 83.70
Candidate Name		Transaction ID : SB17.1082064.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. BULLFEATHERS ON THE HILL		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2025
Mailing Address 410 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 69.40
Candidate Name		Transaction ID : SB17.1082064.26
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BULLFEATHERS ON THE HILL		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2025
Mailing Address 410 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 37.00
Candidate Name		Transaction ID : SB17.1082064.27
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 185 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 119.00

Transaction ID : SB17.1082064.28

Memo Item

Full Name (Last, First, Middle Initial)

B. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 13 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 28.10

Transaction ID : SB17.1082064.29

Memo Item

Full Name (Last, First, Middle Initial)

C. CANVA

Mailing Address 200 EAST 6TH STREET

City SURRY HILLS State TX Zip Code 78701

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.1082064.30

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 Page	FOR LINE NUMBER: (check only one)		PAGE 186 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CASA SANTO STEFANO			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2025	
Mailing Address 1607 N 22ND ST			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33605	Amount of Each Disbursement this Period 94.18	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1082064.31	
Candidate Name			<input checked="" type="checkbox"/> 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. CASA SANTO STEFANO			Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2025	
Mailing Address 1607 N 22ND ST			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33605	Amount of Each Disbursement this Period 88.37	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1082064.32	
Candidate Name			<input checked="" type="checkbox"/> 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. CELLAR.COM			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2025	
Mailing Address 300 MASSACHUSETTS AVE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 236.69	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1082064.33	
Candidate Name			<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 187 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CONSTANT CONTACT			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2025	
Mailing Address 1601 TRAPELO ROAD SUITE 329			FEC Identification Number C	
City WALTHAM	State MA	Zip Code 02451	Amount of Each Disbursement this Period 104.13	
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Category/ Type	Transaction ID : SB17.1082064.34	
Candidate Name		<input checked="" type="checkbox"/> 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. COPPER SHAKER			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2025	
Mailing Address 1502 E 7TH AVE			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33605	Amount of Each Disbursement this Period 85.25	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.35	
Candidate Name		<input checked="" type="checkbox"/> 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. DRACULA'S LEGACY			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2025	
Mailing Address 811 N TAMPA ST			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 32.94	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.36	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 188 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FAT RABBIT PUB			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2025	
Mailing Address 16029 TAMPA PALMS BLVD W			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33647	Amount of Each Disbursement this Period 11.68	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.37	
Candidate Name		<input checked="" type="checkbox"/> 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. FEDEX			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2025	
Mailing Address 942 S SHADY GROVE RD			FEC Identification Number C	
City MEMPHIS	State TN	Zip Code 38120	Amount of Each Disbursement this Period 26.76	
Purpose of Disbursement POSTAGE EXPENSE		Category/ Type	Transaction ID : SB17.1082064.38	
Candidate Name		<input checked="" type="checkbox"/> 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. FEDEX			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2025	
Mailing Address 942 S SHADY GROVE RD			FEC Identification Number C	
City MEMPHIS	State TN	Zip Code 38120	Amount of Each Disbursement this Period 34.56	
Purpose of Disbursement POSTAGE EXPENSE		Category/ Type	Transaction ID : SB17.1082064.39	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 189 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. FEDEX			M M / D D / Y Y Y Y 08 / 19 / 2025	
Mailing Address 942 S SHADY GROVE RD			FEC Identification Number	
City MEMPHIS	State TN	Zip Code 38120	C	
Purpose of Disbursement POSTAGE EXPENSE		Category/ Type	Amount of Each Disbursement this Period	
Candidate Name			1.59	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1082064.40	
State:	District:		<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)			Date of Disbursement	
B. FEDEX			M M / D D / Y Y Y Y 08 / 19 / 2025	
Mailing Address 942 S SHADY GROVE RD			FEC Identification Number	
City MEMPHIS	State TN	Zip Code 38120	C	
Purpose of Disbursement POSTAGE EXPENSE		Category/ Type	Amount of Each Disbursement this Period	
Candidate Name			25.85	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1082064.41	
State:	District:		<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. GASPARILLA BAR			M M / D D / Y Y Y Y 08 / 09 / 2025	
Mailing Address 4100 GEORGE J BEAN OUTBOUND PKWY			FEC Identification Number	
City TAMPA	State FL	Zip Code 33607	C	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Amount of Each Disbursement this Period	
Candidate Name			34.64	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1082064.42	
State:	District:		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 190 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. GLORY DAYS GRILL			Date of Disbursement MM / DD / YYYY 08 / 19 / 2025	
Mailing Address 17508 DONA MICHELLE DR			FEC Identification Number C	
City NEW TAMPA	State FL	Zip Code 33647	Amount of Each Disbursement this Period 83.86	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1082064.43	
Candidate Name			<input checked="" type="checkbox"/> 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. HATTRICKS			Date of Disbursement MM / DD / YYYY 08 / 20 / 2025	
Mailing Address 107 S FRANKLIN ST			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 203.57	
Purpose of Disbursement CATERING SERVICES			Transaction ID : SB17.1082064.44	
Candidate Name			<input checked="" type="checkbox"/> 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. HILTON			Date of Disbursement MM / DD / YYYY 08 / 07 / 2025	
Mailing Address 7930 JONES BRANCH DR			FEC Identification Number C	
City MCLEAN	State VA	Zip Code 22102	Amount of Each Disbursement this Period 12.65	
Purpose of Disbursement TRAVEL: FOOD			Transaction ID : SB17.1082064.45	
Candidate Name			<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 191 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. HILTON			Date of Disbursement MM / DD / YYYY 08 / 19 / 2025	
Mailing Address 7930 JONES BRANCH DR			FEC Identification Number C	
City MCLEAN	State VA	Zip Code 22102	Amount of Each Disbursement this Period 16.95	
Purpose of Disbursement TRAVEL: FOOD		Category/ Type	Transaction ID : SB17.1082064.46	
Candidate Name			<input checked="" type="checkbox"/> 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. HILTON			Date of Disbursement MM / DD / YYYY 08 / 18 / 2025	
Mailing Address 211 N TAMPA ST			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 22.35	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.47	
Candidate Name			<input checked="" type="checkbox"/> 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. HILTON			Date of Disbursement MM / DD / YYYY 08 / 20 / 2025	
Mailing Address 211 N TAMPA ST			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 57.73	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.48	
Candidate Name			<input checked="" type="checkbox"/> 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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. HUNGRY HOWIES		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2025
Mailing Address 6207 E HILLSBOROUGH AVE		FEC Identification Number C
City TAMPA	State FL	Zip Code 33610
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 38.66
Candidate Name		Transaction ID : SB17.1082064.49
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ITALIAN TOUCH		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2025
Mailing Address 8211 46TH AVE N		FEC Identification Number C
City ST. PETERSBURG	State FL	Zip Code 33709
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 154.69
Candidate Name		Transaction ID : SB17.1082064.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. JOHNSON BARBEQUE		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2025
Mailing Address 1407 W DR MLK JR BLVD		FEC Identification Number C
City PLANT CITY	State FL	Zip Code 33566
Purpose of Disbursement CATERING SERVICES		Amount of Each Disbursement this Period 438.24
Candidate Name		Transaction ID : SB17.1082064.51
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 193 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. KAPNOS TAVERNA			Date of Disbursement MM / DD / YYYY 08 / 06 / 2025	
Mailing Address 2401 RONALD REAGAN WASHINGTON NATIONAL AIRPORT ACCESS RD			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period 50.37	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1082064.52	
Candidate Name			<input checked="" type="checkbox"/> 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. LE MERIDIEN TAMPA			Date of Disbursement MM / DD / YYYY 08 / 09 / 2025	
Mailing Address 601 N FLORIDA AVE			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 989.26	
Purpose of Disbursement TRAVEL: LODGING			Transaction ID : SB17.1082064.53	
Candidate Name			<input checked="" type="checkbox"/> 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. LE MERIDIEN TAMPA			Date of Disbursement MM / DD / YYYY 08 / 09 / 2025	
Mailing Address 601 N FLORIDA AVE			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 7.53	
Purpose of Disbursement TRAVEL: MEAL			Transaction ID : SB17.1082064.54	
Candidate Name			<input checked="" type="checkbox"/> 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
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 194 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LE MERIDIEN TAMPA			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2025	
Mailing Address 601 N FLORIDA AVE			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 745.28	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.1082064.55	
Candidate Name		<input checked="" type="checkbox"/> 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. LEGAL SEA FOODS			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2025	
Mailing Address 2401 SMITH BLVD			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period 47.09	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.56	
Candidate Name		<input checked="" type="checkbox"/> 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. LONGBOARDS GRILL			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2025	
Mailing Address 210 STEARNS WHARF			FEC Identification Number C	
City SANTA BARBARA	State CA	Zip Code 93101	Amount of Each Disbursement this Period 78.75	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.57	
Candidate Name		<input checked="" type="checkbox"/> 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
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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 195 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LOS CABALLEROS			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2025	
Mailing Address 308 PENNSYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 290.32	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1082064.58	
Candidate Name		<input checked="" type="checkbox"/> 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. LUCKY PENNY			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2025	
Mailing Address 127 ANACAPA ST			FEC Identification Number C	
City SANTA BARBARA	State CA	Zip Code 93101	Amount of Each Disbursement this Period 1600.00	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1082064.59	
Candidate Name		<input checked="" type="checkbox"/> 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. LYFT			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2025	
Mailing Address 185 BERRY ST SUITE 5000			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94107	Amount of Each Disbursement this Period 42.92	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type	Transaction ID : SB17.1082064.60	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 196 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. LYFT

Mailing Address 185 BERRY ST
SUITE 5000

City SAN FRANCISCO State CA Zip Code 94107

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 28 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 68.59

Transaction ID : SB17.1082064.61

Memo Item

Full Name (Last, First, Middle Initial)

B. MAILCHIMP LLC

Mailing Address 405 N ANGIER AVE, NE

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 121.64

Transaction ID : SB17.1082064.62

Memo Item

Full Name (Last, First, Middle Initial)

C. MAILCHIMP LLC

Mailing Address 405 N ANGIER AVE, NE

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 28 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 60.00

Transaction ID : SB17.1082064.63

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 Page

FOR LINE NUMBER:
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MYPLACE SELF STORAGE		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2025
Mailing Address 2711 BROADWAY CENTER BLVD		FEC Identification Number C
City BRANDON	State FL	Zip Code 33510
Purpose of Disbursement STORAGE EXPENSE		Amount of Each Disbursement this Period 146.68
Candidate Name		Transaction ID : SB17.1082064.64
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. O'BRICKS IRISH PUB & MARTINI BAR		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2025
Mailing Address 427 12TH ST W		FEC Identification Number C
City BRADENTON	State FL	Zip Code 34205
Purpose of Disbursement TRAVEL: FOOD		Amount of Each Disbursement this Period 16.91
Candidate Name		Transaction ID : SB17.1082064.65
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. OLIVE GARDEN		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2025
Mailing Address 1802 N WESTSHORE BLVD		FEC Identification Number C
City TAMPA	State FL	Zip Code 33607
Purpose of Disbursement TRAVEL: FOOD		Amount of Each Disbursement this Period 17.52
Candidate Name		Transaction ID : SB17.1082064.66
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 198 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. OLIVE GARDEN			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2025	
Mailing Address 1802 N WESTSHORE BLVD			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33607	Amount of Each Disbursement this Period 14.90	
Purpose of Disbursement TRAVEL: FOOD		Category/ Type	Transaction ID : SB17.1082064.67	
Candidate Name		<input checked="" type="checkbox"/> 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 GARDEN			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2025	
Mailing Address 1802 N WESTSHORE BLVD			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33607	Amount of Each Disbursement this Period 16.52	
Purpose of Disbursement TRAVEL: FOOD		Category/ Type	Transaction ID : SB17.1082064.68	
Candidate Name		<input checked="" type="checkbox"/> 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. PADDY WAGON IRISH PUB			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2025	
Mailing Address 813 N TAMPA ST			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 36.20	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.69	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 199 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. PARAISSO		Date of Disbursement MM / DD / YYYY 07 / 29 / 2025
Mailing Address 1101 PENNSYLVANIA AVE. SE UNIT 1		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CATERING SERVICES		Amount of Each Disbursement this Period 494.90
Candidate Name		Transaction ID : SB17.1082064.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. PEABODY'S RESTAURANT, BAR & BILLIARDS		Date of Disbursement MM / DD / YYYY 08 / 07 / 2025
Mailing Address 15333 AMBERLY DR		FEC Identification Number C
City TAMPA	State FL	Zip Code 33647
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 95.28
Candidate Name		Transaction ID : SB17.1082064.71
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. PEABODY'S RESTAURANT, BAR & BILLIARDS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2025
Mailing Address 15333 AMBERLY DR		FEC Identification Number C
City TAMPA	State FL	Zip Code 33647
Purpose of Disbursement TRAVEL: FOOD		Amount of Each Disbursement this Period 8.45
Candidate Name		Transaction ID : SB17.1082064.72
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 200 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. PEARL SOCIAL			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2025	
Mailing Address 131 ANACAPA ST B			FEC Identification Number C	
City SANTA BARBARA	State CA	Zip Code 93101	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1082064.73	
Candidate Name		<input checked="" type="checkbox"/> 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. RONALD REAGAN WASHINGTON NATIONAL AIRPORT			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2025	
Mailing Address 2401 RONALD REAGAN WASHINGTON NATIONAL AIRPORT ACCESS RD			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22202	Amount of Each Disbursement this Period 105.00	
Purpose of Disbursement PARKING		Category/ Type	Transaction ID : SB17.1082064.74	
Candidate Name		<input checked="" type="checkbox"/> 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. SCARLET OAK			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2025	
Mailing Address 909 NEW JERSEY AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 51.20	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.75	
Candidate Name		<input checked="" type="checkbox"/> 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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. SCARLET OAK		Date of Disbursement MM / DD / YYYY 08 / 11 / 2025
Mailing Address 909 NEW JERSEY AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement TRAVEL: FOOD		Amount of Each Disbursement this Period 7.70
Candidate Name		Transaction ID : SB17.1082064.76
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. STONEWOOD GRILL & TAVERN		Date of Disbursement MM / DD / YYYY 08 / 19 / 2025
Mailing Address 17050 PALM POINTE DR		FEC Identification Number C
City TAMPA	State FL	Zip Code 33647
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 43.49
Candidate Name		Transaction ID : SB17.1082064.77
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. STONEWOOD GRILL & TAVERN		Date of Disbursement MM / DD / YYYY 08 / 20 / 2025
Mailing Address 17050 PALM POINTE DR		FEC Identification Number C
City TAMPA	State FL	Zip Code 33647
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 141.09
Candidate Name		Transaction ID : SB17.1082064.78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 202 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. STONEWOOD GRILL & TAVERN			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2025	
Mailing Address 17050 PALM POINTE DR			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33647	Amount of Each Disbursement this Period 88.91	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1082064.79	
Candidate Name		<input checked="" type="checkbox"/> 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. TIMPANO HYDE PARK			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2025	
Mailing Address 1610 W SWANN AVE			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33606	Amount of Each Disbursement this Period 13.75	
Purpose of Disbursement TRAVEL: FOOD		Category/ Type	Transaction ID : SB17.1082064.80	
Candidate Name		<input checked="" type="checkbox"/> 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. TUNE INN RESTAURANT & BAR			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2025	
Mailing Address 331 1/2 PENNSYLVANIA AVE. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 8.60	
Purpose of Disbursement TRAVEL: FOOD		Category/ Type	Transaction ID : SB17.1082064.81	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 203 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. TUNE INN RESTAURANT & BAR		Date of Disbursement MM / DD / YYYY 07 / 31 / 2025
Mailing Address 331 1/2 PENNSYLVANIA AVE. SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement TRAVEL: FOOD		Amount of Each Disbursement this Period 14.00
Candidate Name		Transaction ID : SB17.1082064.82
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. U STREET PUB		Date of Disbursement MM / DD / YYYY 08 / 18 / 2025
Mailing Address RONALD REAGAN WASHINGTON NATIONAL AIRPORT		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 41.30
Candidate Name		Transaction ID : SB17.1082064.83
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. U STREET PUB		Date of Disbursement MM / DD / YYYY 08 / 26 / 2025
Mailing Address RONALD REAGAN WASHINGTON NATIONAL AIRPORT		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement TRAVEL: FOOD		Amount of Each Disbursement this Period 13.00
Candidate Name		Transaction ID : SB17.1082064.84
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 204 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2025
Mailing Address 233 S WACKER DR		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606
Purpose of Disbursement TRAVEL: AIR		Amount of Each Disbursement this Period 380.48
Candidate Name		Transaction ID : SB17.1082064.85
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. UNITED VENTURES CONSORTIUM INC. (UVC)		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2025
Mailing Address 2711 26TH ST NE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20018
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 28.38
Candidate Name		Transaction ID : SB17.1082064.86
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2025
Mailing Address 1095 AVENUE OF THE AMERICAS		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10036
Purpose of Disbursement TELEPHONE		Amount of Each Disbursement this Period 187.43
Candidate Name		Transaction ID : SB17.1082064.87
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

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 Page	FOR LINE NUMBER: (check only one)		PAGE 205 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WALTERS SPORTS BAR AND RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2025	
Mailing Address 10 N ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 77.26	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1082064.88	
Candidate Name			<input checked="" type="checkbox"/> 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. WALTERS SPORTS BAR AND RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2025	
Mailing Address 10 N ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 8.81	
Purpose of Disbursement TRAVEL: FOOD			Transaction ID : SB17.1082064.89	
Candidate Name			<input checked="" type="checkbox"/> 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. WE, THE PIZZA			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2025	
Mailing Address 305 PENNSYLVANIA AVE. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 69.73	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1082064.90	
Candidate Name			<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 206 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. YOTEL WASHINGTON DC			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2025	
Mailing Address 415 NEW JERSEY AVE NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 2079.00	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.1082064.91	
Candidate Name		<input checked="" type="checkbox"/> 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			Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2025	
Mailing Address 200 VESEY ST			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10285	Amount of Each Disbursement this Period 8392.49	
Purpose of Disbursement CREDIT CARD PAYMENT: SEE ITEMIZED IF REQUIRED		Category/ Type	Transaction ID : SB17.1072247	
Candidate Name		<input type="checkbox"/> 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. 7-RIVER MART			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2025	
Mailing Address 250 11TH ST NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 24.17	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.1	
Candidate Name		<input checked="" type="checkbox"/> 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).....▶	8392.49
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 Page	FOR LINE NUMBER: (check only one)		PAGE 207 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. ALAMO		Date of Disbursement MM / DD / YYYY 05 / 29 / 2025
Mailing Address 5405 AIRPORT SERVICE RD		FEC Identification Number C
City TAMPA	State FL	Zip Code 33607
Purpose of Disbursement TRAVEL: CAR RENTAL		Amount of Each Disbursement this Period 292.71
Candidate Name		Transaction ID : SB17.1072247.2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. AMAZON		Date of Disbursement MM / DD / YYYY 06 / 12 / 2025
Mailing Address 410 TERRY AVE N		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 96.74
Candidate Name		Transaction ID : SB17.1072247.3
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. AMAZON		Date of Disbursement MM / DD / YYYY 06 / 13 / 2025
Mailing Address 410 TERRY AVE N		FEC Identification Number C
City SEATTLE	State WA	Zip Code 98109
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 145.01
Candidate Name		Transaction ID : SB17.1072247.4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 208 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AMAZON			Date of Disbursement MM / DD / YYYY 06 / 17 / 2025	
Mailing Address 410 TERRY AVE N			FEC Identification Number C	
City SEATTLE	State WA	Zip Code 98109	Amount of Each Disbursement this Period - 96.74	
Purpose of Disbursement CREDIT: OFFICE SUPPLIES		Category/Type	Transaction ID : SB17.1072247.5	
Candidate Name		<input checked="" type="checkbox"/> 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 AIRLINES			Date of Disbursement MM / DD / YYYY 05 / 30 / 2025	
Mailing Address 4255 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 26.00	
Purpose of Disbursement TRAVEL: BAGGAGE FEES		Category/Type	Transaction ID : SB17.1072247.6	
Candidate Name		<input checked="" type="checkbox"/> 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. APPLE			Date of Disbursement MM / DD / YYYY 06 / 22 / 2025	
Mailing Address 1 APPLE PARK WAY			FEC Identification Number C	
City CUPERTINO	State CA	Zip Code 95014	Amount of Each Disbursement this Period 8.49	
Purpose of Disbursement SOFTWARE		Category/Type	Transaction ID : SB17.1072247.8	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 209 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. BONCHON NAVY YARD			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2025	
Mailing Address 1015 HALF ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 20.50	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.9	
Candidate Name		<input checked="" type="checkbox"/> 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. BONCHON NAVY YARD			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2025	
Mailing Address 1015 HALF ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 329.80	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1072247.10	
Candidate Name		<input checked="" type="checkbox"/> 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. BULLFEATHERS ON THE HILL			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2025	
Mailing Address 410 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 56.20	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.11	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 210 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. BULLFEATHERS ON THE HILL			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2025	
Mailing Address 410 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 79.30	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.12	
Candidate Name		<input checked="" type="checkbox"/> 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. BULLFEATHERS ON THE HILL			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2025	
Mailing Address 410 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 40.92	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.13	
Candidate Name		<input checked="" type="checkbox"/> 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. BULLFEATHERS ON THE HILL			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2025	
Mailing Address 410 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 35.80	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.14	
Candidate Name		<input checked="" type="checkbox"/> 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 Page

FOR LINE NUMBER:
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
TRAVEL: FOOD

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
06 / 17 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
9.70

Transaction ID : SB17.1072247.15

Memo Item

Full Name (Last, First, Middle Initial)

B. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
06 / 23 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
35.80

Transaction ID : SB17.1072247.16

Memo Item

Full Name (Last, First, Middle Initial)

C. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
06 / 25 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
28.20

Transaction ID : SB17.1072247.17

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 Page	FOR LINE NUMBER: (check only one)		PAGE 212 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CANVA			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2025	
Mailing Address 200 EAST 6TH STREET			FEC Identification Number C	
City SURRY HILLS	State TX	Zip Code 78701	Amount of Each Disbursement this Period 15.00	
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Category/ Type	Transaction ID : SB17.1072247.18	
Candidate Name		<input checked="" type="checkbox"/> 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. CHIKO			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2025	
Mailing Address 423 8TH ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1702.80	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1072247.19	
Candidate Name		<input checked="" type="checkbox"/> 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. CONGRESSIONAL LIQUOR & DELI			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2025	
Mailing Address 404 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 435.85	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1072247.20	
Candidate Name		<input checked="" type="checkbox"/> 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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. CONGRESSIONAL LIQUOR & DELI

Mailing Address 404 1ST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 25 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 147.17

Transaction ID : SB17.1072247.21

Memo Item

Full Name (Last, First, Middle Initial)

B. CONSTANT CONTACT

Mailing Address 1601 TRAPELO ROAD

City WALTHAM State MA Zip Code 02451

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 06 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 104.13

Transaction ID : SB17.1072247.22

Memo Item

Full Name (Last, First, Middle Initial)

C. CVS

Mailing Address 15 I ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement TRAVEL: FOOD

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 23 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 18.89

Transaction ID : SB17.1072247.23

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 Page	FOR LINE NUMBER: (check only one)		PAGE 214 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. DEANNA HURLEY PHOTO			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2025	
Mailing Address 3820 ANCIENT OAK TRAIL			FEC Identification Number C	
City PLANT CITY	State FL	Zip Code 33565	Amount of Each Disbursement this Period 375.00	
Purpose of Disbursement PHOTOGRAPHY SERVICES		Category/ Type	Transaction ID : SB17.1072247.24	
Candidate Name		<input checked="" type="checkbox"/> 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 AIR LINES			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2025	
Mailing Address 1030 DELTA BOULEVARD			FEC Identification Number C	
City ATLANTA	State GA	Zip Code 30354	Amount of Each Disbursement this Period 399.19	
Purpose of Disbursement TRAVEL: AIR		Category/ Type	Transaction ID : SB17.1072247.25	
Candidate Name		<input checked="" type="checkbox"/> 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. EL BEBE			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2025	
Mailing Address 99 M ST SE #120			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 94.27	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.26	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 215 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. EMMY SQUARED			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2025	
Mailing Address 1300 4TH STREET SE SUITE 100			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 20.60	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1072247.27	
Candidate Name			<input checked="" type="checkbox"/> 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. EZCATER INC			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2025	
Mailing Address 40 WATER ST 5TH FLOOR			FEC Identification Number C	
City BOSTON	State MA	Zip Code 02109	Amount of Each Disbursement this Period 649.00	
Purpose of Disbursement CATERING SERVICES			Transaction ID : SB17.1072247.28	
Candidate Name			<input checked="" type="checkbox"/> 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. FEDEX			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2025	
Mailing Address 942 S SHADY GROVE RD			FEC Identification Number C	
City MEMPHIS	State TN	Zip Code 38120	Amount of Each Disbursement this Period 33.62	
Purpose of Disbursement DELIVERY SERVICES			Transaction ID : SB17.1072247.29	
Candidate Name			<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 216 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. GASPARILLA BAR			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2025	
Mailing Address 4100 GEORGE J BEAN OUTBOUND PKWY			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33607	Amount of Each Disbursement this Period 51.69	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.30	
Candidate Name		<input checked="" type="checkbox"/> 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. HAWK N DOVE CAPITOL HILL DC			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2025	
Mailing Address 329 PENNSYLVANIA AVE. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 136.50	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.31	
Candidate Name		<input checked="" type="checkbox"/> 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. HAWK N DOVE CAPITOL HILL DC			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2025	
Mailing Address 329 PENNSYLVANIA AVE. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 66.10	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.32	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 217 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. HUNGRY HOWIES			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2025	
Mailing Address 6207 E HILLSBOROUGH AVE			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33610	Amount of Each Disbursement this Period 36.14	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.33	
Candidate Name		<input checked="" type="checkbox"/> 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. KING CAB CO			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2025	
Mailing Address 3706 MT VERNON AVE			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22305	Amount of Each Disbursement this Period 25.78	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type	Transaction ID : SB17.1072247.34	
Candidate Name		<input checked="" type="checkbox"/> 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. LE MERIDIEN TAMPA			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2025	
Mailing Address 601 N FLORIDA AVE			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33602	Amount of Each Disbursement this Period 617.78	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.1072247.35	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 218 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LEVY RESTAURANTS		Date of Disbursement MM / DD / YYYY 06 / 11 / 2025
Mailing Address 1901 W MADISON		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60612
Purpose of Disbursement TRAVEL: FOOD	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 17.04	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1072247.38
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. LEVY RESTAURANTS		Date of Disbursement MM / DD / YYYY 06 / 11 / 2025
Mailing Address 1901 W MADISON		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60612
Purpose of Disbursement TRAVEL: FOOD	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 37.35	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1072247.37
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. LINKSTERS TAP ROOM VENICE		Date of Disbursement MM / DD / YYYY 05 / 29 / 2025
Mailing Address 2127 S TAMiami TRL		FEC Identification Number C
City VENICE	State FL	Zip Code 34293
Purpose of Disbursement MEETING EXPENSE: MEALS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 73.42	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1072247.38
State: District:	<input checked="" type="checkbox"/> 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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. LOS CABALLEROS			Date of Disbursement MM / DD / YYYY 06 / 04 / 2025		
Mailing Address 308 PENNSYLVANIA AVE SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 130.68		
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.39		
Candidate Name		<input checked="" type="checkbox"/> 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. LOS CABALLEROS			Date of Disbursement MM / DD / YYYY 06 / 27 / 2025		
Mailing Address 308 PENNSYLVANIA AVE SE			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 243.20		
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1072247.40		
Candidate Name		<input checked="" type="checkbox"/> 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. LYFT			Date of Disbursement MM / DD / YYYY 06 / 07 / 2025		
Mailing Address 185 BERRY ST SUITE 5000			FEC Identification Number C		
City SAN FRANCISCO	State CA	Zip Code 94107	Amount of Each Disbursement this Period 19.55		
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type	Transaction ID : SB17.1072247.41		
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 220 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. LYFT		M M / D D / Y Y Y Y 06 / 07 / 2025
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period
Candidate Name		43.38
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1072247.42
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. LYFT		M M / D D / Y Y Y Y 06 / 21 / 2025
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period
Candidate Name		121.26
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1072247.43
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. LYFT		M M / D D / Y Y Y Y 06 / 27 / 2025
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period
Candidate Name		41.16
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1072247.44
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
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 Page	FOR LINE NUMBER: (check only one)		PAGE 221 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. LYFT		M M / D D / Y Y Y Y 06 / 27 / 2025
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period
Candidate Name		105.47
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1072247.45
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. MAILCHIMP LLC		M M / D D / Y Y Y Y 06 / 16 / 2025
Mailing Address 405 N ANGIER AVE, NE		FEC Identification Number
City ATLANTA	State GA	Zip Code 30308
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Amount of Each Disbursement this Period
Candidate Name		121.64
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1072247.46
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. MARATHON		M M / D D / Y Y Y Y 06 / 22 / 2025
Mailing Address 1739 NEW JERSEY AVE NW		FEC Identification Number
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement TRAVEL: FUEL		Amount of Each Disbursement this Period
Candidate Name		100.00
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1072247.47
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
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 Page	FOR LINE NUMBER: (check only one)		PAGE 222 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MYPLACE SELF STORAGE			Date of Disbursement MM / DD / YYYY 06 / 01 / 2025	
Mailing Address 2711 BROADWAY CENTER BLVD			FEC Identification Number C	
City BRANDON	State FL	Zip Code 33510	Amount of Each Disbursement this Period 146.68	
Purpose of Disbursement STORAGE EXPENSE		Category/ Type	Transaction ID : SB17.1072247.48	
Candidate Name		<input checked="" type="checkbox"/> 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. RIGGS			Date of Disbursement MM / DD / YYYY 06 / 07 / 2025	
Mailing Address 900 F ST NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20004	Amount of Each Disbursement this Period 84.30	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.49	
Candidate Name		<input checked="" type="checkbox"/> 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. SWEETGREEN			Date of Disbursement MM / DD / YYYY 06 / 23 / 2025	
Mailing Address 221 PENNSYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 37.95	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1072247.50	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 223 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. SWEETGREEN		Date of Disbursement MM / DD / YYYY 06 / 27 / 2025
Mailing Address 221 PENNSYLVANIA AVE SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 35.69
Candidate Name		Transaction ID : SB17.1072247.51
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. UNION PUB		Date of Disbursement MM / DD / YYYY 06 / 13 / 2025
Mailing Address 201 MASSACHUSETTS AVE NE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement MEETING EXPENSE: MEALS		Amount of Each Disbursement this Period 84.78
Candidate Name		Transaction ID : SB17.1072247.52
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement MM / DD / YYYY 06 / 17 / 2025
Mailing Address 1095 AVENUE OF THE AMERICAS		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10036
Purpose of Disbursement TELEPHONE		Amount of Each Disbursement this Period 200.32
Candidate Name		Transaction ID : SB17.1072247.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 224 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
A. WALTERS SPORTS BAR AND RESTAURANT

Mailing Address 10 N ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CATERING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 12 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 458.06

Transaction ID : SB17.1072247.54

Memo Item

Full Name (Last, First, Middle Initial)
B. WHOLE FOODS MARKET

Mailing Address 101 H ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement TRAVEL: FOOD

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 23 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 18.06

Transaction ID : SB17.1072247.56

Memo Item

Full Name (Last, First, Middle Initial)
C. WHOLE FOODS MARKET

Mailing Address 101 H ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement 06 / 23 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 42.39

Transaction ID : SB17.1072247.55

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 Page	FOR LINE NUMBER: (check only one)		PAGE 225 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2025	
Mailing Address 200 VESEY ST			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 10285	Amount of Each Disbursement this Period 11995.16	
Purpose of Disbursement CREDIT CARD PAYMENT: SEE ITEMIZED IF REQUIRED			Transaction ID : SB17.1076921	
Candidate Name			<input type="checkbox"/> 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. AMAZON			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2025	
Mailing Address 410 TERRY AVE N			FEC Identification Number C	
City SEATTLE	State WA	Zip Code 98109	Amount of Each Disbursement this Period - 145.01	
Purpose of Disbursement CREDIT: OFFICE SUPPLIES			Transaction ID : SB17.1076921.1	
Candidate Name			<input checked="" type="checkbox"/> 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. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2025	
Mailing Address 4255 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 726.49	
Purpose of Disbursement TRAVEL: AIR			Transaction ID : SB17.1076921.2	
Candidate Name			<input checked="" type="checkbox"/> 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).....▶	11995.16
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 226 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2025	
Mailing Address 4255 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 483.48	
Purpose of Disbursement TRAVEL: AIR		Category/ Type	Transaction ID : SB17.1076921.3	
Candidate Name			<input checked="" type="checkbox"/> 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 AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 07 / 04 / 2025	
Mailing Address 4255 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period 357.69	
Purpose of Disbursement TRAVEL: AIR		Category/ Type	Transaction ID : SB17.1076921.4	
Candidate Name			<input checked="" type="checkbox"/> 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. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2025	
Mailing Address 4255 AMON CARTER BLVD			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 76155	Amount of Each Disbursement this Period - 353.01	
Purpose of Disbursement CREDIT: TRAVEL: AIR		Category/ Type	Transaction ID : SB17.1076921.5	
Candidate Name			<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 227 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 07 / 05 / 2025
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORT WORTH	State TX	Zip Code 76155
Purpose of Disbursement CREDIT: TRAVEL: AIR		Amount of Each Disbursement this Period - 483.48
Candidate Name		Transaction ID : SB17.1076921.6
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 07 / 08 / 2025
Mailing Address 200 VESEY ST		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement CREDIT: MEMBERSHIP FEES		Amount of Each Disbursement this Period - 32.08
Candidate Name		Transaction ID : SB17.1076921.7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 07 / 08 / 2025
Mailing Address 200 VESEY ST		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement MEMBERSHIP FEES		Amount of Each Disbursement this Period 320.83
Candidate Name		Transaction ID : SB17.1076921.8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

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 Page	FOR LINE NUMBER: (check only one)		PAGE 228 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. APPLE		Date of Disbursement MM / DD / YYYY 07 / 22 / 2025
Mailing Address 1 APPLE PARK WAY		FEC Identification Number C
City CUPERTINO	State CA	Zip Code 95014
Purpose of Disbursement SOFTWARE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 8.49	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1076921.10
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BISTRO CACAO		Date of Disbursement MM / DD / YYYY 07 / 02 / 2025
Mailing Address 316 MASSACHUSETTS AVE NE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement MEETING EXPENSE: MEALS	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 106.90	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1076921.61
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BULLFEATHERS ON THE HILL		Date of Disbursement MM / DD / YYYY 06 / 30 / 2025
Mailing Address 410 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement MEETING EXPENSE: MEALS	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 63.90	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1076921.11
State: District:	<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 229 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
A. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 70.40

Transaction ID : SB17.1076921.12

Memo Item

Full Name (Last, First, Middle Initial)
B. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 07 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 35.80

Transaction ID : SB17.1076921.13

Memo Item

Full Name (Last, First, Middle Initial)
C. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 08 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 56.20

Transaction ID : SB17.1076921.14

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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
A. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 09 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 28.20

Transaction ID : SB17.1076921.15

Memo Item

Full Name (Last, First, Middle Initial)
B. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 09 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 27.10

Transaction ID : SB17.1076921.16

Memo Item

Full Name (Last, First, Middle Initial)
C. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 51.20

Transaction ID : SB17.1076921.17

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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
A. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 17 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
65.60

Transaction ID : SB17.1076921.18

Memo Item

Full Name (Last, First, Middle Initial)
B. BULLFEATHERS ON THE HILL

Mailing Address 410 FIRST ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 23 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
60.00

Transaction ID : SB17.1076921.19

Memo Item

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

Mailing Address 200 EAST 6TH STREET

City SURRY HILLS State TX Zip Code 78701

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 16 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
15.00

Transaction ID : SB17.1076921.20

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 Page	FOR LINE NUMBER: (check only one)		PAGE 232 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2025	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 76.30	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.21	
Candidate Name		<input checked="" type="checkbox"/> 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. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2025	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 14.05	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.22	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2025	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 26.42	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.23	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 233 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2025	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 97.66	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.24	
Candidate Name		<input checked="" type="checkbox"/> 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. CHIKO			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2025	
Mailing Address 423 8TH ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1056.00	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1076921.25	
Candidate Name		<input checked="" type="checkbox"/> 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. CONGRESSIONAL LIQUOR & DELI			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2025	
Mailing Address 404 1ST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 72.60	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1076921.26	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 234 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

A. CONSTANT CONTACT

Full Name (Last, First, Middle Initial)
Mailing Address 1601 TRAPELO ROAD
SUITE 329

City WALTHAM State MA Zip Code 02451

Purpose of Disbursement SOFTWARE SUBSCRIPTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 104.13

Transaction ID : SB17.1076921.27

Memo Item

B. DELTA AIR LINES

Full Name (Last, First, Middle Initial)
Mailing Address 6000 N TERMINAL PKWY
SUITE 4000

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement CREDIT: TRAVEL: AIR

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: - 399.19

Transaction ID : SB17.1076921.88

Memo Item

C. FEDEX

Full Name (Last, First, Middle Initial)
Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement DELIVERY SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 34.56

Transaction ID : SB17.1076921.89

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 Page	FOR LINE NUMBER: (check only one)		PAGE 235 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)			Date of Disbursement	
A. FEDEX			M M / D D / Y Y Y Y 07 / 16 / 2025	
Mailing Address 942 S SHADY GROVE RD			FEC Identification Number	
City MEMPHIS	State TN	Zip Code 38120	C	
Purpose of Disbursement DELIVERY SERVICES		Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			35.06	
Disbursement For: 2026		Category/ Type	Transaction ID : SB17.1076921.30	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<input checked="" type="checkbox"/> Memo Item	
State: _____	District: _____			

Full Name (Last, First, Middle Initial)			Date of Disbursement	
B. FEDEX			M M / D D / Y Y Y Y 07 / 18 / 2025	
Mailing Address 942 S SHADY GROVE RD			FEC Identification Number	
City MEMPHIS	State TN	Zip Code 38120	C	
Purpose of Disbursement DELIVERY SERVICES		Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			27.50	
Disbursement For: 2026		Category/ Type	Transaction ID : SB17.1076921.31	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<input checked="" type="checkbox"/> Memo Item	
State: _____	District: _____			

Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. GRAZIE GRAZIE			M M / D D / Y Y Y Y 07 / 14 / 2025	
Mailing Address 85 DISTRICT SQUARE SW			FEC Identification Number	
City WASHINGTON	State DC	Zip Code 20024	C	
Purpose of Disbursement CATERING SERVICES		Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			415.00	
Disbursement For: 2026		Category/ Type	Transaction ID : SB17.1076921.32	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 236 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. HOME2SUITES			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2025	
Mailing Address 390 AIRPORT RD			FEC Identification Number C	
City ARDEN	State NC	Zip Code 28704	Amount of Each Disbursement this Period 214.94	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.1076921.33	
Candidate Name		<input checked="" type="checkbox"/> 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. I EGG YOU			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2025	
Mailing Address 517 8TH ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 888.45	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1076921.34	
Candidate Name		<input checked="" type="checkbox"/> 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. JACOBS COFFEE HOUSE			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2025	
Mailing Address 401 8TH ST NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 28.34	
Purpose of Disbursement TRAVEL: FOOD		Category/ Type	Transaction ID : SB17.1076921.35	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 237 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
A. JACOBS COFFEE HOUSE

Mailing Address 401 8TH ST NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement TRAVEL: FOOD

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 23 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 15.82

Transaction ID : SB17.1076921.36

Memo Item

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

Mailing Address 308 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CATERING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 222.30

Transaction ID : SB17.1076921.37

Memo Item

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

Mailing Address 308 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement MEETING EXPENSE: MEALS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 10 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 39.00

Transaction ID : SB17.1076921.38

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 Page	FOR LINE NUMBER: (check only one)		PAGE 238 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. LYFT		M M / D D / Y Y Y Y 06 / 30 / 2025
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period
Candidate Name		42.36
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1076921.39
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. LYFT		M M / D D / Y Y Y Y 07 / 05 / 2025
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period
Candidate Name		113.29
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1076921.40
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. LYFT		M M / D D / Y Y Y Y 07 / 17 / 2025
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period
Candidate Name		19.84
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1076921.41
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
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 Page	FOR LINE NUMBER: (check only one)		PAGE 239 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. LYFT		M M / D D / Y Y Y Y 07 / 17 / 2025
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period
Candidate Name		11.81
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1076921.42
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. LYFT		M M / D D / Y Y Y Y 07 / 25 / 2025
Mailing Address 185 BERRY ST SUITE 5000		FEC Identification Number
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period
Candidate Name		20.38
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1076921.43
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. MAILCHIMP LLC		M M / D D / Y Y Y Y 07 / 16 / 2025
Mailing Address 405 N ANGIER AVE, NE		FEC Identification Number
City ATLANTA	State GA	Zip Code 30308
Purpose of Disbursement SOFTWARE SUBSCRIPTION		Amount of Each Disbursement this Period
Candidate Name		121.64
Office Sought:	Disbursement For: 2026	Transaction ID : SB17.1076921.44
<input type="checkbox"/> House	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼	
<input type="checkbox"/> President		
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 Page	FOR LINE NUMBER: (check only one)		PAGE 240 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. MIDDLEBURG DELI			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2025	
Mailing Address 2 N LIBERTY ST			FEC Identification Number C	
City MIDDLEBURG	State VA	Zip Code 20117	Amount of Each Disbursement this Period 29.70	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.45	
Candidate Name		<input checked="" type="checkbox"/> 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. MYPLACE SELF STORAGE			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2025	
Mailing Address 2711 BROADWAY CENTER BLVD			FEC Identification Number C	
City BRANDON	State FL	Zip Code 33510	Amount of Each Disbursement this Period 146.68	
Purpose of Disbursement STORAGE EXPENSE		Category/ Type	Transaction ID : SB17.1076921.46	
Candidate Name		<input checked="" type="checkbox"/> 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. OMNI HOMESTEAD RESORT			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2025	
Mailing Address 7696 SAM SNEAD HWY			FEC Identification Number C	
City HOT SPRINGS	State VA	Zip Code 24445	Amount of Each Disbursement this Period 667.68	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.1076921.47	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 241 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. OMNI HOMESTEAD RESORT			Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2025	
Mailing Address 7696 SAM SNEAD HWY			FEC Identification Number C	
City HOT SPRINGS	State VA	Zip Code 24445	Amount of Each Disbursement this Period 131.28	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.1076921.48	
Candidate Name		<input checked="" type="checkbox"/> 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. PARAISO			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2025	
Mailing Address 1101 PENNSYLVANIA AVE. SE UNIT 1			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 494.90	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1076921.49	
Candidate Name		<input checked="" type="checkbox"/> 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. PARAISO			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2025	
Mailing Address 1101 PENNSYLVANIA AVE. SE UNIT 1			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 1993.29	
Purpose of Disbursement CATERING SERVICES		Category/ Type	Transaction ID : SB17.1076921.50	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 242 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. RED HORSE TAVERN			Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2025	
Mailing Address 118 W WASHINGTON ST			FEC Identification Number C	
City MIDDLEBURG	State VA	Zip Code 20117	Amount of Each Disbursement this Period 38.00	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.51	
Candidate Name		<input checked="" type="checkbox"/> 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. SALAMANDER MIDDLEBURG			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2025	
Mailing Address 500 N PENDLETON ST			FEC Identification Number C	
City MIDDLEBURG	State VA	Zip Code 20117	Amount of Each Disbursement this Period 1151.38	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.1076921.52	
Candidate Name		<input checked="" type="checkbox"/> 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. SALAMANDER MIDDLEBURG			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2025	
Mailing Address 500 N PENDLETON ST			FEC Identification Number C	
City MIDDLEBURG	State VA	Zip Code 20117	Amount of Each Disbursement this Period 1841.44	
Purpose of Disbursement TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.1076921.53	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 243 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. SALAMANDER MIDDLEBURG			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2025	
Mailing Address 500 N PENDLETON ST			FEC Identification Number C	
City MIDDLEBURG	State VA	Zip Code 20117	Amount of Each Disbursement this Period - 41.34	
Purpose of Disbursement CREDIT: TRAVEL: LODGING		Category/ Type	Transaction ID : SB17.1076921.54	
Candidate Name		<input checked="" type="checkbox"/> 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. SWEETGREEN			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2025	
Mailing Address 221 PENNSYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 53.13	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.57	
Candidate Name		<input checked="" type="checkbox"/> 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. SWEETGREEN			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2025	
Mailing Address 221 PENNSYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 33.55	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.55	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 244 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. SWEETGREEN			Date of Disbursement MM / DD / YYYY 07 / 17 / 2025	
Mailing Address 221 PENNSYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 33.55	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.56	
Candidate Name		<input checked="" type="checkbox"/> 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. SWEETGREEN			Date of Disbursement MM / DD / YYYY 07 / 22 / 2025	
Mailing Address 221 PENNSYLVANIA AVE SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 33.72	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.58	
Candidate Name		<input checked="" type="checkbox"/> 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. THE DUBLINER RESTAURANT			Date of Disbursement MM / DD / YYYY 07 / 08 / 2025	
Mailing Address 4 F ST NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 149.36	
Purpose of Disbursement MEETING EXPENSE: MEALS		Category/ Type	Transaction ID : SB17.1076921.59	
Candidate Name		<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 245 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. THE MONOCLE RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2025	
Mailing Address 107 D ST NE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 34.70	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1076921.60	
Candidate Name			<input checked="" type="checkbox"/> 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. TUNE INN RESTAURANT & BAR			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2025	
Mailing Address 331 1/2 PENNSYLVANIA AVE. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 65.00	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1076921.62	
Candidate Name			<input checked="" type="checkbox"/> 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. TUNE INN RESTAURANT & BAR			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2025	
Mailing Address 331 1/2 PENNSYLVANIA AVE. SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 147.20	
Purpose of Disbursement MEETING EXPENSE: MEALS			Transaction ID : SB17.1076921.63	
Candidate Name			<input checked="" type="checkbox"/> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 246 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2025
Mailing Address 1095 AVENUE OF THE AMERICAS		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10036
Purpose of Disbursement TELEPHONE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 205.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1076921.64
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. BASCOM COMMUNICATIONS & CONSULTING, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2025
Mailing Address 217 SOUTH ADAMS STREET		FEC Identification Number C
City TALLAHASSEE	State FL	Zip Code 32301
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2268.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1084306
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BASCOM COMMUNICATIONS & CONSULTING, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2025
Mailing Address 217 SOUTH ADAMS STREET		FEC Identification Number C
City TALLAHASSEE	State FL	Zip Code 32301
Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 796.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1084306.1
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3064.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 247 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. BERKE FARAH LLP			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2025	
Mailing Address 701 8TH STREET, NW SUITE 620			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 6025.00	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type	Transaction ID : SB17.1084661	
Candidate Name			<input type="checkbox"/> 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. BERKE FARAH LLP			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2025	
Mailing Address 701 8TH STREET, NW SUITE 620			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20001	Amount of Each Disbursement this Period 95.00	
Purpose of Disbursement LEGAL CONSULTING		Category/ Type	Transaction ID : SB17.1078888	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2025	
Mailing Address 300 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 88.00	
Purpose of Disbursement EVENT EXPENSE: CATERING		Category/ Type	Transaction ID : SB17.1081717	
Candidate Name			<input type="checkbox"/> 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).....▶	6208.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 248 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2025
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement EVENT EXPENSE: CATERING		Amount of Each Disbursement this Period 45.50
Candidate Name		Transaction ID : SB17.1081718
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2025
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement EVENT EXPENSE: CATERING		Amount of Each Disbursement this Period 363.00
Candidate Name		Transaction ID : SB17.1075220
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2025
Mailing Address 300 FIRST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement EVENT EXPENSE: CATERING		Amount of Each Disbursement this Period 88.00
Candidate Name		Transaction ID : SB17.1085233
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	496.50
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
A. CHAIN BRIDGE BANK, N.A.

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 07 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
22.10

Transaction ID : SB17.1078705

Memo Item

Full Name (Last, First, Middle Initial)
B. DEMOCRACY ENGINE LLC

Mailing Address 237 FLORIDA AVENUE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 11 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
5.00

Transaction ID : SB17.1084441

Memo Item

Full Name (Last, First, Middle Initial)
C. DEMOCRACY ENGINE LLC

Mailing Address 237 FLORIDA AVENUE NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
5.10

Transaction ID : SB17.1074247

Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 22.10

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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
A. DEMOCRACY ENGINE LLC

Mailing Address **237 FLORIDA AVENUE NW**

City **WASHINGTON** State **DC** Zip Code **20001**

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
08 / 07 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
0.05

Transaction ID : **SB17.1078747**

Memo Item

Full Name (Last, First, Middle Initial)
B. GRAND VALLEY CONSULTING, LLC

Mailing Address **1931 BEAVER LANE**

City **MCLEAN** State **VA** Zip Code **22101**

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
09 / 04 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
6077.06

Transaction ID : **SB17.1082911**

Memo Item

Full Name (Last, First, Middle Initial)
C. GRAND VALLEY CONSULTING, LLC

Mailing Address **1931 BEAVER LANE**

City **MCLEAN** State **VA** Zip Code **22101**

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2026
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
07 / 07 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
6134.85

Transaction ID : **SB17.1073144**

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ **12211.96**

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 Page	FOR LINE NUMBER: (check only one)		PAGE 251 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. GRAND VALLEY CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 08 / 25 / 2025
Mailing Address 1931 BEAVER LANE		FEC Identification Number C
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 6183.80
Candidate Name		Transaction ID : SB17.1079503
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. GUSTO		Date of Disbursement MM / DD / YYYY 07 / 03 / 2025
Mailing Address 525 20TH ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement PAYROLL FEES		Amount of Each Disbursement this Period 55.00
Candidate Name		Transaction ID : SB17.1073614
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. GUSTO		Date of Disbursement MM / DD / YYYY 08 / 04 / 2025
Mailing Address 525 20TH ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement PAYROLL FEES		Amount of Each Disbursement this Period 55.00
Candidate Name		Transaction ID : SB17.1078745
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6293.80
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 Page	FOR LINE NUMBER: (check only one)	PAGE 252 OF 271			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. GUSTO		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2025
Mailing Address 525 20TH ST		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94107
Purpose of Disbursement PAYROLL FEES		Amount of Each Disbursement this Period 55.00
Candidate Name	Category/ Type	Transaction ID : SB17.1083293
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. HOFFMAN, LANDON, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2025
Mailing Address 2023 MIDDLEWOOD DR		FEC Identification Number C
City TALLAHASSEE	State FL	Zip Code 32312
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	Transaction ID : SB17.1077983
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. HOFFMAN, LANDON, , ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2025
Mailing Address 2023 MIDDLEWOOD DR		FEC Identification Number C
City TALLAHASSEE	State FL	Zip Code 32312
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	Transaction ID : SB17.1083145
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2055.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 253 OF 271			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. HOFFMAN, LANDON, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2025		
Mailing Address 2023 MIDDLEWOOD DR			FEC Identification Number C		
City TALLAHASSEE	State FL	Zip Code 32312	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement ADMINISTRATIVE CONSULTING		Category/ Type	Transaction ID : SB17.1072312		
Candidate Name		<input type="checkbox"/> 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. RED CURVE SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2025		
Mailing Address 138 CONANT STREET SUITE 401			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 2064.52		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.1082579		
Candidate Name		<input type="checkbox"/> 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. RED CURVE SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2025		
Mailing Address 138 CONANT STREET SUITE 401			FEC Identification Number C		
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 2000.00		
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.1077525		
Candidate Name		<input type="checkbox"/> 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).....▶	5064.52
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 254 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2025	
Mailing Address 138 CONANT STREET SUITE 401			FEC Identification Number C	
City BEVERLY	State MA	Zip Code 01915	Amount of Each Disbursement this Period 3116.59	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.1077387	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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. REPUBLICAN MAIN STREET PARTNERSHIP			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2025	
Mailing Address 411 NEW JERSEY AVENUE SE			FEC Identification Number C C00165159	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement EVENT EXPENSE: FACILITY RENTAL		Category/ Type	Transaction ID : SB17.1076703	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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. REPUBLICAN PARTY OF PASCO			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2025	
Mailing Address 12043 COBBLE STONE DR			FEC Identification Number C	
City HUDSON	State FL	Zip Code 34667	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type	Transaction ID : SB17.1079327	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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).....▶	5916.59
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 255 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. S. WHITE STRATEGIES, LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2025	
Mailing Address 525 MONTGOMERY ST UNIT 343			FEC Identification Number C	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 1525.00	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	Transaction ID : SB17.1073618	
Candidate Name		<input type="checkbox"/> 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 BIG BLUE BBQ			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2025	
Mailing Address PO BOX 155			FEC Identification Number C	
City NEW PORT RICHEY	State FL	Zip Code 34652	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement EVENT SPONSORSHIP		Category/ Type	Transaction ID : SB17.1085429	
Candidate Name		<input type="checkbox"/> 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. UBER			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2025	
Mailing Address 1455 MARKET ST STE 400			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94103	Amount of Each Disbursement this Period 50.04	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Category/ Type	Transaction ID : SB17.1075851	
Candidate Name		<input type="checkbox"/> 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).....▶	4075.04
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 256 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2025
Mailing Address 1455 MARKET ST STE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 27.38
Candidate Name		Transaction ID : SB17.1074234
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2025
Mailing Address 1455 MARKET ST STE 400		FEC Identification Number C
City SAN FRANCISCO	State CA	Zip Code 94103
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION		Amount of Each Disbursement this Period 16.61
Candidate Name		Transaction ID : SB17.1074462
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 19.70
Candidate Name		Transaction ID : SB17.1081941
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	63.69
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 257 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 19.90	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1076077	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 19.70	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1076282	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 167.49	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1085656	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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).....▶	207.09
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 Page	FOR LINE NUMBER: (check only one)		PAGE 258 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 08 / 27 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1.97	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1081613
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 07 / 16 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2.05	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1074708
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement MM / DD / YYYY 08 / 14 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 0.08	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1079580
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	4.10
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 Page	FOR LINE NUMBER: (check only one)		PAGE 259 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 48.20	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1080148
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 39.44	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1077694
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 3.03	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1073641
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	90.67
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 260 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement MM / DD / YYYY 08 / 06 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 137.90	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1078240	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement MM / DD / YYYY 07 / 10 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 1.37	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1073843	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement MM / DD / YYYY 07 / 18 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 197.00	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1075131	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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).....▶	336.27
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 Page	FOR LINE NUMBER: (check only one)		PAGE 261 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 137.90	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1072657	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 39.40	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1072935	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 1.95	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1074500	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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).....▶	179.25
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 Page	FOR LINE NUMBER: (check only one)		PAGE 262 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 0.20	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1074937	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 39.40	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1075715	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 66.98	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1077043	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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).....▶	106.58
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 Page	FOR LINE NUMBER: (check only one)		PAGE 263 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 19.70	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1077344	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 1.61	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1078615	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 118.59	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1078937	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> 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).....▶	139.90
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 Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 271			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 1.37
Candidate Name	Category/Type	Transaction ID : SB17.1079174
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 1.95
Candidate Name	Category/Type	Transaction ID : SB17.1079363
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES		Amount of Each Disbursement this Period 275.80
Candidate Name	Category/Type	Transaction ID : SB17.1080479
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	279.12
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 265 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 39.40	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1082111	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 19.70	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1083238	
Candidate Name		<input type="checkbox"/> 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. WINRED TECHNICAL SERVICES LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2025	
Mailing Address 1776 WILSON BLVD SUITE 530			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 2.98	
Purpose of Disbursement MERCHANT FEES		Category/ Type	Transaction ID : SB17.1083990	
Candidate Name		<input type="checkbox"/> 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).....▶	62.08
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 Page	FOR LINE NUMBER: (check only one)		PAGE 266 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 19.70	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1084481
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 53.65	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1084662
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 0.08	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1084892
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	73.43
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 267 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 103.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1085109
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 16.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1085340
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 71.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1085456
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	191.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 268 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 39.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1086099
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 59.10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1086660
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 19.70	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1086805
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	118.20
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 269 OF 271	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. WINRED TECHNICAL SERVICES LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2025
Mailing Address 1776 WILSON BLVD SUITE 530		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement MERCHANT FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 39.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.1087126
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/Type	
Candidate Name	Amount of Each Disbursement this Period	
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	39.40
TOTAL This Period (last page this line number only).....▶	95109.35

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 270 OF 271	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
LAUREL LEE FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial) A. FLORIDA FEDERATION OF REPUBLICAN WOMEN			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2025	
Mailing Address 295 HICKORY STREET			FEC Identification Number C	
City MONTICELLO	State FL	Zip Code 33244	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement NON-FEDERAL CONTRIBUTION		Category/ Type	Transaction ID : SB21.1084682	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. HILLSBOROUGH COUNTY REPUBLICAN EXECUTIVE COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2025	
Mailing Address 5118 N 56TH ST SUITE 115			FEC Identification Number C	
City TAMPA	State FL	Zip Code 33610	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement NON-FEDERAL CONTRIBUTION		Category/ Type	Transaction ID : SB21.1084643	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1800.00
TOTAL This Period (last page this line number only).....▶	1800.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

LAUREL LEE FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AAIM CONSULTING SERVICES, LLC			Nature of Debt (Purpose): STRATEGY CONSULTING
Mailing Address PO BOX 2244			
City VALRICO	State FL	Zip Code 33595	

Outstanding Balance Beginning This Period <input style="width:90%;" type="text" value="2000.00"/>	Transaction ID : SD10.16144
Amount Incurred This Period <input style="width:90%;" type="text" value="0.00"/>	Payment This Period <input style="width:90%;" type="text" value="2000.00"/>
Outstanding Balance at Close of This Period <input style="width:90%;" type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASCOM COMMUNICATIONS & CONSULTING, LLC			Nature of Debt (Purpose): COMMUNICATIONS CONSULTING
Mailing Address 217 SOUTH ADAMS STREET			
City TALLAHASSEE	State FL	Zip Code 32301	

Outstanding Balance Beginning This Period <input style="width:90%;" type="text" value="2268.00"/>	Transaction ID : SD10.16054
Amount Incurred This Period <input style="width:90%;" type="text" value="0.00"/>	Payment This Period <input style="width:90%;" type="text" value="2268.00"/>
Outstanding Balance at Close of This Period <input style="width:90%;" type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PROSEQUENCE, LLC			Nature of Debt (Purpose): GENERAL POLITICAL CONSULTING
Mailing Address PO BOX 10666			
City TALLAHASSEE	State FL	Zip Code 32302	

Outstanding Balance Beginning This Period <input style="width:90%;" type="text" value="7500.00"/>	Transaction ID : SD10.6899
Amount Incurred This Period <input style="width:90%;" type="text" value="0.00"/>	Payment This Period <input style="width:90%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:90%;" type="text" value="7500.00"/>	

1) SUBTOTALS This Period This Page (optional)	<input style="width:90%;" type="text" value="7500.00"/>
2) TOTALS This Period (last page this line number only)	<input style="width:90%;" type="text" value="7500.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input style="width:90%;" type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width:90%;" type="text" value="7500.00"/>