

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

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

LAHOOD FOR CONGRESS

ADDRESS (number and street)

P.O. BOX 10735

Check if different  
than previously  
reported. (ACC)

PEORIA

IL

61612

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00575050

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

IL

16

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

01

Y Y Y Y

2023

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2023

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

NOBLE, KENT, A., ,

Type or Print Name of Treasurer

Signature of Treasurer

NOBLE, KENT, A., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

14

Y Y Y Y

2023

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 163

Write or Type Committee Name  
LAHOOD FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
01 01 2023

To:

M M / D D / Y Y Y Y  
03 31 2023

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....                                              | 417205.22               | 444780.96                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 2300.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 417205.22               | 442480.96                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 165400.06               | 337025.18                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 165400.06               | 337025.18                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 4301748.79              |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                    |

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 163

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

LAHOOD FOR CONGRESS

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

To:

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

**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).....

119212.00

132212.00

(ii) Unitemized.....

13743.22

14818.96

(iii) TOTAL of contributions from individuals ▶

132955.22

147030.96

(b) Political Party Committees.....

0.00

0.00

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

284250.00

297750.00

(d) The Candidate.....

0.00

0.00

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

417205.22

444780.96

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

90540.15

136175.24

## 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)..... ▶

507745.37

580956.20

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

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| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 165400.06                     | 337025.18                          |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 2900.00                            |
| 19. LOAN REPAYMENTS:                                                         |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....                                                 | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                             |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 900.00                             |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 1400.00                            |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 2300.00                            |
| 21. OTHER DISBURSEMENTS .....                                                | 5285.37                       | 14035.37                           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 170685.43                     | 356260.55                          |

## **III. CASH SUMMARY**

|                                                                                       |            |
|---------------------------------------------------------------------------------------|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 3964688.85 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 507745.37  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 4472434.22 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 170685.43  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 4301748.79 |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                                                       |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>ALKIRE, BRUCE, L, ,</b>                                                                 |             |                                                                                       | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 27 / 2023 |  |
| Mailing Address 234 W WINDFLOWER WAY                                                                                                            |             |                                                                                       | Transaction ID : A709FBEBAA6624353B32                      |  |
| City<br>DUNLAP                                                                                                                                  | State<br>IL | Zip Code<br>61525-9424                                                                | Amount of Each Receipt this Period<br>3.00                 |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED                                  |                                                            |  |
| Name of Employer<br>CBCDR                                                                                                                       |             | Occupation<br>BROKER                                                                  |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>256.00                                                    |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                                                       | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                                                       | Transaction ID : A1B06388125614CE1BE5                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                                                                | Amount of Each Receipt this Period<br>3.00                 |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY<br>TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                                                            |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                                                  |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>ALKIRE, BRUCE, L, ,</b>                                                                 |             |                                                                                       | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 27 / 2023 |  |
| Mailing Address 234 W WINDFLOWER WAY                                                                                                            |             |                                                                                       | Transaction ID : ACCBAE499F1C340199BD                      |  |
| City<br>DUNLAP                                                                                                                                  | State<br>IL | Zip Code<br>61525-9424                                                                | Amount of Each Receipt this Period<br>100.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED                                  |                                                            |  |
| Name of Employer<br>CBCDR                                                                                                                       |             | Occupation<br>BROKER                                                                  |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>256.00                                                    |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                                                       | 103.00                                                     |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                                                       |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                                |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                                | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                                | Transaction ID : A92C5DD5A9DBA4B1CA7F                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                                         | Amount of Each Receipt this Period<br>100.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                                 |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                           |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>ASKEW, WHITAKER, , ,</b>                                                                |             |                                                                | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 29 / 2023 |  |
| Mailing Address 7614 HOLIDAY DR                                                                                                                 |             |                                                                | Transaction ID : ACFC4C95ACFB54427853                      |  |
| City<br>ALEXANDRIA                                                                                                                              | State<br>VA | Zip Code<br>22308-1032                                         | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>SUBJECT MATTER<br>Occupation<br>CONSULTANT |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1500.00                            |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                                | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                                | Transaction ID : AADB3BCA3694841F3B45                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                                         | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                                 |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                           |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                                | 1500.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                                |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**BARONA BAND OF MISSION INDIANS**  
Mailing Address 1095 BARONA RD

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>LAKESIDE | State<br>CA | Zip Code<br>92040-1516 |
|------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 08  |   | 2023    |

Transaction ID : A4117E4AE0946425BB00

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**BITTNER, TIMOTHY, R., ,**  
Mailing Address 19580 E 1300 NORTH RD

|                     |             |                        |
|---------------------|-------------|------------------------|
| City<br>BLOOMINGTON | State<br>IL | Zip Code<br>61705-5494 |
|---------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SELF EMPLOYED

FARMER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

Transaction ID : ACF83948127444AC9802

Amount of Each Receipt this Period

250.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**BOCKER, MARK, , ,**  
Mailing Address 10742 IL RT 84 W

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>MELROSE PARK | State<br>IL | Zip Code<br>60164 |
|----------------------|-------------|-------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SELF EMPLOYED

FARMER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

Transaction ID : AD81A90BD82E14942BDB

Amount of Each Receipt this Period

500.00

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

1750.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>BONDERMAN, DAVID, , ,</b>                                                               |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 301 COMMERCE ST<br>SUITE 3150                                                                                                   |             |                                     | Transaction ID : A60CE937FF0474A759D9                      |  |
| City<br>FORT WORTH                                                                                                                              | State<br>TX | Zip Code<br>76102-4102              | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                           |                                                            |  |
| Name of Employer<br>TPG CAPITAL                                                                                                                 |             | Occupation<br>FOUNDER               |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2500.00 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>BOWEN, JODY, A, ,</b>                                                                   |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 23 / 2023 |  |
| Mailing Address 3207 14TH ST                                                                                                                    |             |                                     | Transaction ID : AA2C375F92AD44406BF9                      |  |
| City<br>MOLINE                                                                                                                                  | State<br>IL | Zip Code<br>61265-6243              | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                           |                                                            |  |
| Name of Employer<br>NONE                                                                                                                        |             | Occupation<br>HOMEMAKER             |                                                            |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>6600.00 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>BOWEN, JODY, A, ,</b>                                                                   |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 23 / 2023 |  |
| Mailing Address 3207 14TH ST                                                                                                                    |             |                                     | Transaction ID : A1B036356530D474F8E2                      |  |
| City<br>MOLINE                                                                                                                                  | State<br>IL | Zip Code<br>61265-6243              | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                           |                                                            |  |
| Name of Employer<br>NONE                                                                                                                        |             | Occupation<br>HOMEMAKER             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>6600.00 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                     | 8100.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                     |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BOWEN, KENNETH, E, ,**

Mailing Address 3207 14TH ST

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>MOLINE | State<br>IL | Zip Code<br>61265-6243 |
|----------------|-------------|------------------------|

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

|                                        |                   |
|----------------------------------------|-------------------|
| Name of Employer<br>SPRINGFIELD ARMORY | Occupation<br>CEO |
|----------------------------------------|-------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
6600.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 23 / 2023          |

Transaction ID : A556B2515D35040F18EC

Amount of Each Receipt this Period

3300.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BOWEN, KENNETH, E, ,**

Mailing Address 3207 14TH ST

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>MOLINE | State<br>IL | Zip Code<br>61265-6243 |
|----------------|-------------|------------------------|

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

|                                        |                   |
|----------------------------------------|-------------------|
| Name of Employer<br>SPRINGFIELD ARMORY | Occupation<br>CEO |
|----------------------------------------|-------------------|

Receipt For: 2024  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
6600.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 23 / 2023          |

Transaction ID : AC7E85F6F67934A3995D

Amount of Each Receipt this Period

3300.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BUCHERGER, RAYMOND, , ,**

Mailing Address 632 5TH STREET, NE

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20002-5202 |
|--------------------|-------------|------------------------|

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

|                                           |                                |
|-------------------------------------------|--------------------------------|
| Name of Employer<br>FBB FEDERAL RELATIONS | Occupation<br>FEDERAL LOBBYIST |
|-------------------------------------------|--------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 05 / 2023          |

Transaction ID : AB5C1DA1504B04F69AA2

Amount of Each Receipt this Period

3300.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

|         |
|---------|
| 9900.00 |
|---------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 13 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                      | Transaction ID : A659CD2879A6B44289F6                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891               | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation       |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>CHADWICK, KIRSTEN, A., ,</b>                                                            |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 601 PRESIDENT FORD LN                                                                                                           |             |                                      | Transaction ID : AF6A14D874B34478DB27                      |  |
| City<br>ALEXANDRIA                                                                                                                              | State<br>VA | Zip Code<br>22302-3033               | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation       |                                                            |  |
| FIERCE GOVERNMENT RELATIONS                                                                                                                     |             | CONSULTANT                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00  |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                      | Transaction ID : A6D7BB498F229471387A                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891               | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation       |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                      | 1000.00                                                    |  |
| <b>TOTAL</b> 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 163

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>CORTESI, NICHOLAS, , ,</b>                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 20 / 2023 |  |
| Mailing Address 1502 N SEDGWICK ST<br>UNIT 6N                                                                                                   |             |                                                      | Transaction ID : A3C48D806CCDB442D8F1                      |  |
| City<br>CHICAGO                                                                                                                                 | State<br>IL | Zip Code<br>60610-2999                               | Amount of Each Receipt this Period<br>3.00                 |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>SELF EMPLOYED                                                                                                               |             | Occupation<br>ATTORNEY                               |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>353.00                   |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 27 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : AFA242AE94C044EF6B2F                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>3.00                 |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.                                                                                        |             |                                                      |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>CORTESI, NICHOLAS, , ,</b>                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 20 / 2023 |  |
| Mailing Address 1502 N SEDGWICK ST<br>UNIT 6N                                                                                                   |             |                                                      | Transaction ID : A2BAB9BF289A5404CBEE                      |  |
| City<br>CHICAGO                                                                                                                                 | State<br>IL | Zip Code<br>60610-2999                               | Amount of Each Receipt this Period<br>350.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>SELF EMPLOYED                                                                                                               |             | Occupation<br>ATTORNEY                               |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>353.00                   |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 353.00                                                     |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

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

PAGE 12 OF 163

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 27 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : A4B60EDE253A14B04B59                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>350.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           | TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>CUNIFFE, AMY, , ,</b>                                                                   |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 06 / 2023 |  |
| Mailing Address 6950 DUNCRAIG CT                                                                                                                |             |                                                      | Transaction ID : A1C8149CAB0464EFDA59                      |  |
| City<br>MCLEAN                                                                                                                                  | State<br>VA | Zip Code<br>22101-1568                               | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>SPLITOK STRATEGIES                                                                                                          |             | Occupation<br>CONSULTANT                             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2900.00                  |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 13 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : A0CE85B474B6046A6866                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           | TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 2900.00                                                    |  |
| <b>TOTAL</b> 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 163

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>DAVIS, WILLIAM, , ,</b>                                                                 |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 6224 35TH ST N                                                                                                                  |             |                                                      | Transaction ID : AD7430A46E5F043018F8                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22213-1404                               | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>CAPITOL TAX PARTNERS                                                                                                        |             | Occupation<br>PARTNER                                |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00                  |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : A55E473E48ECF4362BBF                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>DENINNO, DAVID, , ,</b>                                                                 |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 06 / 2023 |  |
| Mailing Address 584 SQUAW RUN RD E                                                                                                              |             |                                                      | Transaction ID : A18BEE8E5AC0C4F1A850                      |  |
| City<br>PITTSBURGH                                                                                                                              | State<br>PA | Zip Code<br>15238-1922                               | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>WABTEC CORPORATION                                                                                                          |             | Occupation<br>EXEC. VP AND GENERAL COUNSEL           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>500.00                   |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 1500.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 13 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                      | Transaction ID : A9224CF4365024A49AC9                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891               | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                           | TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>DILLON, JOHN, D., ,</b>                                                                 |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 1711 W CEDAR HILLS DR                                                                                                           |             |                                      | Transaction ID : ACAEE21740263439BA88                      |  |
| City<br>DUNLAP                                                                                                                                  | State<br>IL | Zip Code<br>61525-9363               | Amount of Each Receipt this Period<br>250.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                            |                                                            |  |
| Name of Employer<br>J.C. DILLON INC                                                                                                             |             | Occupation<br>CONTRACTOR             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>250.00   |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>DONAHUE, DAVID, , ,</b>                                                                 |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 1016 NE ADAMS ST                                                                                                                |             |                                      | Transaction ID : A2AD190CDA77040D0A62                      |  |
| City<br>PEORIA                                                                                                                                  | State<br>IL | Zip Code<br>61603-4002               | Amount of Each Receipt this Period<br>300.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                            |                                                            |  |
| Name of Employer<br>JA FRITCH AND SONS, INC                                                                                                     |             | Occupation<br>PRESIDENT              |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>300.00   |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                      | 550.00                                                     |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                      |                                                            |  |

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

PAGE 15 OF 163

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**DRAY, DONALD, D, ,**  
Mailing Address 6355 MUIRFIELD LNCity  
ROCKFORDState  
ILZip Code  
61114-7835FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FIBERGLASS INNOVATIONSOccupation  
PRESIDENTReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 23 2023

Transaction ID : A6D10EAA0C4964D9EA2B

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**EASTMAN, SAGE, , ,**  
Mailing Address 3643 TRINITY DRCity  
ALEXANDRIAState  
VAZip Code  
22304-1840FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MEHLMAN CASTAGNETTI ROSEN THOMASOccupation  
LOBBYISTReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 30 2023

Transaction ID : AC325FAE6531646C3B5D

Amount of Each Receipt this Period

2900.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**ELLING, DAN, , ,**  
Mailing Address 8412 RIVERSIDE RDCity  
ALEXANDRIAState  
VAZip Code  
22308-1545FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LINCOLN POLICY GROUPOccupation  
GOV'T AFFAIRSReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 07 2023

Transaction ID : A96CF1E777CC84BBBB74

Amount of Each Receipt this Period

2900.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

6800.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 13 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                      | Transaction ID : A498E4C8EFD5E4C56917                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891               | Amount of Each Receipt this Period<br>56362.21             |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation       |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>FEEHERY, JOHN, , ,</b>                                                                  |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 411 G ST SE                                                                                                                     |             |                                      | Transaction ID : ABF6DF8DBEA55464D983                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20003-4257               | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation       |                                                            |  |
| EFB ADVOCACY                                                                                                                                    |             | CONSULTANT                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>500.00   |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                      | Transaction ID : A9F6E6628BA794257B69                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891               | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation       |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                      | 500.00                                                     |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                      |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**FETSKO, MICHAEL, , ,**  
Mailing Address 307 BUCKINGHAM DRCity State Zip Code  
VENETIA PA 15367-2383FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WABTEC CORPORATIONOccupation  
EXECUTIVEReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 06 2023

Transaction ID : AB6D60340165E4D25B4B

Amount of Each Receipt this Period

250.00

☐ Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED**B.** Full Name (Last, First, Middle Initial)  
**WINRED**  
Mailing Address PO BOX 9891City State Zip Code  
ARLINGTON VA 22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

56362.21

Date of Receipt

M M / D D / Y Y Y Y Y  
02 13 2023

Transaction ID : A8E4836E4EBF044B8B75

Amount of Each Receipt this Period

250.00

☒ Memo Item  
INTERMEDIARYTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**C.** Full Name (Last, First, Middle Initial)  
**FIERGE, RANDALL, B, ,**  
Mailing Address 114 WEST AVECity State Zip Code  
QUINCY IL 62301-4372FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FIERGE AUTO PARTS COOccupation  
MERCHANTReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 30 2023

Transaction ID : A9CE0A206D11046958F4

Amount of Each Receipt this Period

250.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                    |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>FOLLEY, GREGORY, S, ,</b>                                                               |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 23 / 2023 |  |
| Mailing Address 940 CAPE MARCO DR<br>UNIT 2006                                                                                                  |             |                                    | Transaction ID : AF2E7D28C2C7B44B385D                      |  |
| City<br>MARCO ISLAND                                                                                                                            | State<br>FL | Zip Code<br>34145-6639             | Amount of Each Receipt this Period<br>250.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                          |                                                            |  |
| Name of Employer<br>NONE                                                                                                                        |             | Occupation<br>RETIRED              |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>250.00   |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>FRANCIS, STEPHEN, , ,</b>                                                               |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>01 / 27 / 2023 |  |
| Mailing Address 103 WEST MONROE AVENUE                                                                                                          |             |                                    | Transaction ID : A86562767581A4587AF4                      |  |
| City<br>ALEXANDRIA                                                                                                                              | State<br>VA | Zip Code<br>22301-1921             | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                          |                                                            |  |
| Name of Employer<br>ERNST YOUNG                                                                                                                 |             | Occupation<br>PRINCIPAL            |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>2900.00  |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 06 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                    | Transaction ID : A85D326EDA335425B8EB                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891             | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                          |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                         |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>56362.21 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶                                                                                          |             |                                    | 3150.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only).....▶                                                                                |             |                                    |                                                            |  |

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FRATES, JAMES, , ,**

Mailing Address 471 GROVE ST

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>NEEDHAM | State<br>MA | Zip Code<br>02492-1009 |
|-----------------|-------------|------------------------|

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

|                                            |                   |
|--------------------------------------------|-------------------|
| Name of Employer<br>AMYLYX PHARMACEUTICALS | Occupation<br>CFO |
|--------------------------------------------|-------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2023

Transaction ID : A185AEBD66E01425F921

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**FREEMAN, PETER, , ,**

Mailing Address 1307 NEW YORK AVE NW

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20005-4704 |
|--------------------|-------------|------------------------|

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

|                               |                       |
|-------------------------------|-----------------------|
| Name of Employer<br>FS VECTOR | Occupation<br>PARTNER |
|-------------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 07 / 2023

Transaction ID : AB18AE679BF974470A43

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>ARLINGTON | State<br>VA | Zip Code<br>22219-1891 |
|-------------------|-------------|------------------------|

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

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 56362.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2023

Transaction ID : A9825A9C965E44FB6A8C

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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

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

1500.00

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>GRAFMEYER, RICK, , ,</b>                                                                |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 23 / 2023 |  |
| Mailing Address 101 CONSTITUTION AVENUE N.W.                                                                                                    |             |                                                      | Transaction ID : AF4782934D762465F80A                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20001-2133                               | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>CAPITOL TAX                                                                                                                 |             | Occupation<br>ATTORNEY                               |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00                  |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 27 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : AAD4D526A466348559E8                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>GREMER, RICK, E., ,</b>                                                                 |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 9 HAWTHORNE DRIVE                                                                                                               |             |                                                      | Transaction ID : A58341F4D08D644C68F9                      |  |
| City<br>NORMAL                                                                                                                                  | State<br>IL | Zip Code<br>61761-4019                               | Amount of Each Receipt this Period<br>250.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                                            |                                                            |  |
| Name of Employer<br>NONE                                                                                                                        |             | Occupation<br>RETIRED                                |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>250.00                   |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 1250.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 163  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                                                    |                                                                                       |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>HARRIS, CAROLINE, , ,</b>                                                               |                                                    |                                                                                       | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 28 / 2023 |  |
| Mailing Address 5150 KLINGLE ST NW                                                                                                              |                                                    |                                                                                       | Transaction ID : A0F9C987D5F86462BBBB                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC                                        | Zip Code<br>20016-2655                                                                | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |                                                    | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED                                  |                                                            |  |
| Name of Employer<br>CTP                                                                                                                         | Occupation<br>PARTNER                              |                                                                                       |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>500.00                 |                                                                                       |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |                                                    |                                                                                       | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |                                                    |                                                                                       | Transaction ID : A6EC8BB86C34D484EB6B                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA                                        | Zip Code<br>22219-1891                                                                | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |                                                    | Memo Item<br>INTERMEDIARY<br>TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. |                                                            |  |
| Name of Employer                                                                                                                                | Occupation                                         |                                                                                       |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>56362.21               |                                                                                       |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>HILLIAR, PAUL, , ,</b>                                                                  |                                                    |                                                                                       | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 11 PEEKS PIKE                                                                                                                   |                                                    |                                                                                       | Transaction ID : AD6EFD8E3D2A24A1BB56                      |  |
| City<br>CHARLESTON                                                                                                                              | State<br>SC                                        | Zip Code<br>29407-7237                                                                | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |                                                    | Memo Item                                                                             |                                                            |  |
| Name of Employer<br>WILLIS TOWERS WATSON                                                                                                        | Occupation<br>SR. DIRECTOR & HEAD OF GOV'T RELATIO |                                                                                       |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>500.00                 |                                                                                       |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |                                                    |                                                                                       | 1000.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |                                                    |                                                                                       |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>JAIN, NALIN, , ,</b>                                                                    |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 03 / 2023 |  |
| Mailing Address 30 ISABELLA ST                                                                                                                  |             |                                                      | Transaction ID : A4AB76BF3890D4357838                      |  |
| City<br>PITTSBURGH                                                                                                                              | State<br>PA | Zip Code<br>15212-5862                               | Amount of Each Receipt this Period<br>250.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>WABTEC CORPORATION                                                                                                          |             | Occupation<br>PRESIDENT DIGITAL ELECTRONICS          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>250.00                   |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 13 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : AA9ED6880EADD42FCB52                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>250.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>JAVENS, CHRISTOPHER, , ,</b>                                                            |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 29 / 2023 |  |
| Mailing Address 2725 LINDA MARIE DR                                                                                                             |             |                                                      | Transaction ID : A54E57A048A4A4FED904                      |  |
| City<br>OAKTON                                                                                                                                  | State<br>VA | Zip Code<br>22124-1115                               | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>CAPITOL TAX PARTNERS LLP                                                                                                    |             | Occupation<br>CONSULTANT                             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1503.00                  |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 1750.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WINRED****A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

56362.21

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A1C3B2C1C6CFD4B0489C

Amount of Each Receipt this Period

1500.00

☒ Memo Item  
INTERMEDIARYTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

**JAVENS, CHRISTOPHER, , ,**

Mailing Address 2725 LINDA MARIE DR

City

OAKTON

State

VA

Zip Code

22124-1115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPITOL TAX PARTNERS LLP

Occupation

CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1503.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

Transaction ID : A5AEA29E2390C4138A4A

Amount of Each Receipt this Period

3.00

☐ Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED**C.**

Full Name (Last, First, Middle Initial)

**WINRED**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

56362.21

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

Transaction ID : A5356360270314CE48BB

Amount of Each Receipt this Period

3.00

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

3.00

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>JORY, DAVID, , ,</b>                                                                    |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 6758 EDGE RD                                                                                                                    |             |                                                      | Transaction ID : A629F942E0837421C9A5                      |  |
| City<br>ROYAL OAK                                                                                                                               | State<br>MD | Zip Code<br>21662-1501                               | Amount of Each Receipt this Period<br>3.00                 |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>EDGE CREEK PARTNERS                                                                                                         |             | Occupation<br>CONSULTANT                             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1503.00                  |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : A76689120B5B84117A6D                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>3.00                 |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>JORY, DAVID, , ,</b>                                                                    |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 6758 EDGE RD                                                                                                                    |             |                                                      | Transaction ID : AD4542574FB194441BA4                      |  |
| City<br>ROYAL OAK                                                                                                                               | State<br>MD | Zip Code<br>21662-1501                               | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>EDGE CREEK PARTNERS                                                                                                         |             | Occupation<br>CONSULTANT                             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1503.00                  |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 1503.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : AE1909EC31B42495085E                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           | TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>KIES, WILLIAM, S., , JR.</b>                                                            |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 1500 N ASTOR ST<br>APT 8                                                                                                        |             |                                                      | Transaction ID : AE95BC10F1DA34B1189E                      |  |
| City<br>CHICAGO                                                                                                                                 | State<br>IL | Zip Code<br>60610-1640                               | Amount of Each Receipt this Period<br>250.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                                            |                                                            |  |
| Name of Employer<br>KIES CONSULTING LLC                                                                                                         |             | Occupation<br>CONSULTANT                             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>250.00                   |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>KING, ANDREW, , ,</b>                                                                   |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 15 / 2023 |  |
| Mailing Address 11 E LENOX ST                                                                                                                   |             |                                                      | Transaction ID : A1765F14CF6F044CE83A                      |  |
| City<br>CHEVY CHASE                                                                                                                             | State<br>MD | Zip Code<br>20815-4210                               | Amount of Each Receipt this Period<br>2000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>NEALE CREEK, LLC                                                                                                            |             | Occupation<br>LOBBYIST                               |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2000.00                  |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 2250.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 20 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : A6F8220189F364BBBA6A                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>2000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           | TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>KOOL, JUNIOR, G., ,</b>                                                                 |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 624 TIMBER RIDGE CT                                                                                                             |             |                                                      | Transaction ID : A57043531CD3A44228F7                      |  |
| City<br>EUREKA                                                                                                                                  | State<br>IL | Zip Code<br>61530-9205                               | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                                            |                                                            |  |
| Name of Employer<br>VERMEER MIDWEST                                                                                                             |             | Occupation<br>OFFICE ASST.                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00                  |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>LEHMAN, ROB, , ,</b>                                                                    |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 28 / 2023 |  |
| Mailing Address 2108 WINDSOR RD                                                                                                                 |             |                                                      | Transaction ID : AA824121FCE67485C80E                      |  |
| City<br>ALEXANDRIA                                                                                                                              | State<br>VA | Zip Code<br>22307-1016                               | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>WILMER HALE                                                                                                                 |             | Occupation<br>ADVOCATE                               |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2900.00                  |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 3900.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                                    |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                                    | Transaction ID : AC377307269154FEDBE9                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                                             | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                                     |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                               |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>MCCANNELL, CHRISTOPHER, , ,</b>                                                         |             |                                                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 16 / 2023 |  |
| Mailing Address 2100 11TH ST. NW                                                                                                                |             |                                                                    | Transaction ID : AAB7DAD3A52C24313948                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20001-8024                                             | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation<br>GRAY ROBINSON<br>SENIOR DIRECTOR |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1500.00                                |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE PAC</b>                                        |             |                                                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 251 H ST NW                                                                                                                     |             |                                                                    | Transaction ID : A918E0EF922AE40DDB30                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20001-2604                                             | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00797670                                                                       |             | Name of Employer<br>Occupation                                     |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1550.00                                |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                                    | 1500.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                                    |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A.** MCKELVAIN, KATHRYN, COX, ,

Mailing Address 1509 CRIMSON KING CT

City

GENESEO

State

IL

Zip Code

61254-8649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPRINGFIELD ARMORY

Occupation

EVENT COORDINATOR

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 23 2023

Transaction ID : A154CDFF7D7E7470DA3E

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** MCKELVAIN, KATHRYN, COX, ,

Mailing Address 1509 CRIMSON KING CT

City

GENESEO

State

IL

Zip Code

61254-8649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPRINGFIELD ARMORY

Occupation

EVENT COORDINATOR

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 23 2023

Transaction ID : A647DC69E81884B00A44

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** MCKELVAIN, STEPHEN, H, ,

Mailing Address 1509 CRIMSON KING CT

City

GENESEO

State

IL

Zip Code

61254-8649

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPRINGFIELD ARMORY

Occupation

PRESIDENT

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 23 2023

Transaction ID : A8664FAE303B5474D821

Amount of Each Receipt this Period

3300.00

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

9900.00

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                   |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>MCKELVAIN, STEPHEN, H, ,</b>                                                            |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 23 / 2023 |  |
| Mailing Address 1509 CRIMSON KING CT                                                                                                            |             |                                   | Transaction ID : A3E11CA2CE12443C4BB5                      |  |
| City<br>GENESEO                                                                                                                                 | State<br>IL | Zip Code<br>61254-8649            | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>SPRINGFIELD ARMORY                                                                                                          |             | Occupation<br>PRESIDENT           |                                                            |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>6600.00 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>METZINGER, ROBERT, M., ,</b>                                                            |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 12237 N WAKE ROBIN WAY                                                                                                          |             |                                   | Transaction ID : AC30B8A5F67D04278BBC                      |  |
| City<br>DUNLAP                                                                                                                                  | State<br>IL | Zip Code<br>61525-9409            | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer<br>ALTORFER, INC.                                                                                                              |             | Occupation<br>MANAGER             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>500.00  |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>MORONGO BAND OF MISSION INDIANS</b>                                                     |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 12700 PUMARRA RD                                                                                                                |             |                                   | Transaction ID : A8991C2EEAF5744E3A95                      |  |
| City<br>BANNING                                                                                                                                 | State<br>CA | Zip Code<br>92220-6977            | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                        |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>3300.00 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                   | 7100.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                   |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

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

Mailing Address 2824 CARNOUSTIE LN

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>QUINCY | State<br>IL | Zip Code<br>62301-6176 |
|----------------|-------------|------------------------|

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

|                                        |                         |
|----------------------------------------|-------------------------|
| Name of Employer<br>QUINCY MEDIA, INC. | Occupation<br>PRESIDENT |
|----------------------------------------|-------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 01 / 07 / 2023          |

Transaction ID : A92C7DB78C87D4911BDE

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo Item

EARMARKED THROUGH NABPAC

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF BROADCASTERS PAC (NABPAC)**

Mailing Address 1771 N STREET, NW

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20036-2800 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00009985

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 01 / 07 / 2023          |

Transaction ID : ACB025CDCCF1E46B49EF

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**OAKLEY, RALPH, , ,**

Mailing Address 2824 CARNOUSTIE LN

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>QUINCY | State<br>IL | Zip Code<br>62301-6176 |
|----------------|-------------|------------------------|

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

|                                        |                         |
|----------------------------------------|-------------------------|
| Name of Employer<br>QUINCY MEDIA, INC. | Occupation<br>PRESIDENT |
|----------------------------------------|-------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 15 / 2023          |

Transaction ID : AA88CF827DAEB49F3A57

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH  
NATIONAL ASSOCIATION OF BROADCASTERS PAC**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

|         |
|---------|
| 2000.00 |
|---------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF BROADCASTERS PAC (NABPAC)**

Mailing Address 1771 N STREET, NW

City  
WASHINGTONState  
DCZip Code  
20036-2800FEC ID number of contributing  
federal political committee.**C** C00009985

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 15 2023

Transaction ID : A4914B72E4E654AF682B

Amount of Each Receipt this Period

1000.00

☒ Memo Item  
INTERMEDIARYTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)  
**ODEH, SAM, , ,**

Mailing Address 8651 CROWN CT

City  
BURR RIDGEState  
ILZip Code  
60527-7130FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

PBDUSA

DIRECTOR

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 24 2023

Transaction ID : AC170A7472BE34C9EB9F

Amount of Each Receipt this Period

250.00

☐ Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED**C.** Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

56362.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 30 2023

Transaction ID : A332EA32A510D4F95A00

Amount of Each Receipt this Period

250.00

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

250.00

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                    |                                                             |                                                                   |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------------------------------|-------------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>ODEH, SAM, , ,</b>                                                                      |                    |                                                             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>01 / 31 / 2023</b> |  |
| Mailing Address <b>8651 CROWN CT</b>                                                                                                            |                    |                                                             | <b>Transaction ID : A66420023FB8847A5888</b>                      |  |
| City<br><b>BURR RIDGE</b>                                                                                                                       | State<br><b>IL</b> | Zip Code<br><b>60527-7130</b>                               | Amount of Each Receipt this Period<br><b>250.00</b>               |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    | Memo Item<br><b>EARMARKED (NON-DIRECTED) THROUGH WINRED</b> |                                                                   |  |
| Name of Employer<br><b>PBDUSA</b>                                                                                                               |                    | Occupation<br><b>DIRECTOR</b>                               |                                                                   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>500.00</b>                   |                                                                   |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |                    |                                                             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>02 / 06 / 2023</b> |  |
| Mailing Address <b>PO BOX 9891</b>                                                                                                              |                    |                                                             | <b>Transaction ID : A2F63701EEE1649D4851</b>                      |  |
| City<br><b>ARLINGTON</b>                                                                                                                        | State<br><b>VA</b> | Zip Code<br><b>22219-1891</b>                               | Amount of Each Receipt this Period<br><b>250.00</b>               |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    | Memo Item<br><b>INTERMEDIARY</b>                            |                                                                   |  |
| Name of Employer                                                                                                                                |                    | Occupation                                                  |                                                                   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>56362.21</b>                 |                                                                   |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>ODEH, SAM, , ,</b>                                                                      |                    |                                                             | Date of Receipt<br>M M / D D / Y Y Y Y Y<br><b>03 / 30 / 2023</b> |  |
| Mailing Address <b>8651 CROWN CT</b>                                                                                                            |                    |                                                             | <b>Transaction ID : A015CB475464C468BBA7</b>                      |  |
| City<br><b>BURR RIDGE</b>                                                                                                                       | State<br><b>IL</b> | Zip Code<br><b>60527-7130</b>                               | Amount of Each Receipt this Period<br><b>500.00</b>               |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    | Memo Item<br><b>EARMARKED (NON-DIRECTED) THROUGH WINRED</b> |                                                                   |  |
| Name of Employer<br><b>PBDUSA</b>                                                                                                               |                    | Occupation<br><b>DIRECTOR</b>                               |                                                                   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>1000.00</b>                  |                                                                   |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |                    |                                                             | <b>750.00</b>                                                     |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |                    |                                                             |                                                                   |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : A6054CAFF62814D388E0                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           | TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>ONEIDA NATION</b>                                                                       |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address PO BOX 365                                                                                                                      |             |                                                      | Transaction ID : A13151684609B473AABB                      |  |
| City<br>ONEIDA                                                                                                                                  | State<br>WI | Zip Code<br>54155-0365                               | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00                  |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>PALOMO, OSWALDO, , ,</b>                                                                |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>01 / 10 / 2023 |  |
| Mailing Address 446 STURGES RD                                                                                                                  |             |                                                      | Transaction ID : A0A3217E223F74416A43                      |  |
| City<br>FAIRFIELD                                                                                                                               | State<br>CT | Zip Code<br>06824-2851                               | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>CHARTWELL STRATEGY GROUP                                                                                                    |             | Occupation<br>MANAGING DIRECTOR                      |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2900.00                  |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 3900.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>01 / 16 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                     | Transaction ID : <b>ABFBFA72EF2BC4FF8974</b>               |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                              | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                      |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>PFRANG, STEVEN, , ,</b>                                                                 |             |                                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 702 KINGS CT                                                                                                                    |             |                                                     | Transaction ID : <b>AF67602B24A6C4BFB945</b>               |  |
| City<br>ALEXANDRIA                                                                                                                              | State<br>VA | Zip Code<br>22302-4013                              | Amount of Each Receipt this Period<br>1650.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation<br>BGR<br>CONSULTANT |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1650.00                 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                     | Transaction ID : <b>A023126F261F04A22BC3</b>               |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                              | Amount of Each Receipt this Period<br>1650.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                      |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                     | 1650.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                     |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>QUINN, JACK, , ,</b>                                                                              |                                                  |
| Mailing Address 200 DELAWARE AVE                                                                                                                |                                                  |
| City<br>BUFFALO                                                                                                                                 | State<br>NY                                      |
| Zip Code<br>14202-2150                                                                                                                          |                                                  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |                                                  |
| Name of Employer<br>BARCLAY DAMON                                                                                                               | Occupation<br>SR. ADVISOR FOR PUBLIC & COMMUNITY |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>250.00               |

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  |   | 23  |   | 2023        |

Transaction ID : A52AFC3D918734C55A76

Amount of Each Receipt this Period

250.00

☐ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>RAHN, DONNA, J, ,</b>                                                                             |                                     |
| Mailing Address 24956 HAZELWOOD                                                                                                                 |                                     |
| City<br>GENESEO                                                                                                                                 | State<br>IL                         |
| Zip Code<br>61254                                                                                                                               |                                     |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |                                     |
| Name of Employer<br>SPRINGFIELD ARMORY                                                                                                          | Occupation<br>EXEC. ADMINISTRATOR   |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>5200.00 |

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 23  |   | 2023        |

Transaction ID : A70860BF8B05E4E778CE

Amount of Each Receipt this Period

3300.00

☐ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>RAHN, DONNA, J, ,</b>                                                                             |                                     |
| Mailing Address 24956 HAZELWOOD                                                                                                                 |                                     |
| City<br>GENESEO                                                                                                                                 | State<br>IL                         |
| Zip Code<br>61254                                                                                                                               |                                     |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |                                     |
| Name of Employer<br>SPRINGFIELD ARMORY                                                                                                          | Occupation<br>EXEC. ADMINISTRATOR   |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>5200.00 |

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 23  |   | 2023        |

Transaction ID : ADB09E31032C746D4B7C

Amount of Each Receipt this Period

1900.00

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

|         |
|---------|
| 5450.00 |
|---------|

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

RAHN, KEVIN, K, ,

Mailing Address 24956 HAZELWOOD WEST RD

City

GENESEO

State

IL

Zip Code

61254-9157

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DEERE &amp; CO.

Occupation

PRODUCT DEVELOPMENT ENGINEER

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5200.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 23  |   | 2023        |

Transaction ID : A05D2F5FFA21C4D63A55

Amount of Each Receipt this Period

1900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RAHN, KEVIN, K, ,

Mailing Address 24956 HAZELWOOD WEST RD

City

GENESEO

State

IL

Zip Code

61254-9157

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DEERE &amp; CO.

Occupation

PRODUCT DEVELOPMENT ENGINEER

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5200.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 23  |   | 2023        |

Transaction ID : AEE0B7B8D38674043B4E

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REESE, DENNIS, J, ,

Mailing Address 215 W NORTH ST

City

GENESEO

State

IL

Zip Code

61254-1413

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SPRINGFIELD INCORPORATED

Occupation

EXECUTIVE

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 23  |   | 2023        |

Transaction ID : A58ABCCDE58C140908FF

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

8500.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>REESE, DENNIS, J, ,</b>                                                                 |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 23 / 2023 |  |
| Mailing Address 215 W NORTH ST                                                                                                                  |             |                                     | Transaction ID : ADE2F5AAC62464F09AA3                      |  |
| City<br>GENESEO                                                                                                                                 | State<br>IL | Zip Code<br>61254-1413              | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                           |                                                            |  |
| Name of Employer<br>SPRINGFIELD INCORPORATED                                                                                                    |             | Occupation<br>EXECUTIVE             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>6600.00 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>REESE, JANE, , ,</b>                                                                    |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 23 / 2023 |  |
| Mailing Address 23976 STAGECOACH RD                                                                                                             |             |                                     | Transaction ID : AC228FBA485DD474B8F1                      |  |
| City<br>GENESEO                                                                                                                                 | State<br>IL | Zip Code<br>61254-8361              | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                           |                                                            |  |
| Name of Employer<br>NONE                                                                                                                        |             | Occupation<br>RETIRED               |                                                            |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>6600.00 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>REESE, JANE, , ,</b>                                                                    |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 23 / 2023 |  |
| Mailing Address 23976 STAGECOACH RD                                                                                                             |             |                                     | Transaction ID : AC1515F0D796948D8A4F                      |  |
| City<br>GENESEO                                                                                                                                 | State<br>IL | Zip Code<br>61254-8361              | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                           |                                                            |  |
| Name of Employer<br>NONE                                                                                                                        |             | Occupation<br>RETIRED               |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>6600.00 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                     | 9900.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                     |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**ROBERTI, CLIFF, , ,**  
Mailing Address 2725 BLAINE DRIVECity  
CHEVY CHASEState  
MDZip Code  
20815-3043FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FEDERAL HALL POLICY ADVISORS, LLCOccupation  
CONSULTANT

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 29 2023

Transaction ID : AE126B43D748A4732B7D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

**B.** Full Name (Last, First, Middle Initial)  
**WINRED**  
Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

56362.21

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : AB6B90D4A3FE04334940

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**C.** Full Name (Last, First, Middle Initial)  
**SACKETT, DEAN, , ,**  
Mailing Address 8541 RIVERSIDE RDCity  
ALEXANDRIAState  
VAZip Code  
22308-2206FEC ID number of contributing  
federal political committee.

C

Name of Employer  
POLARIS CAPITOL STRATEGIESOccupation  
ATTORNEY LOBBYIST

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 29 2023

Transaction ID : A348ABDEB80FA42E58C0

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) 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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                      | Transaction ID : A80F211242C6D4E2DA43                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891               | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                           | TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED.   |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>SALT RIVER PIMA MARICOPA INDIAN COMMUNITY</b>                                           |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 10005 E OSBORN RD                                                                                                               |             |                                      | Transaction ID : A8833E98B0E84461887D                      |  |
| City<br>SCOTTSDALE                                                                                                                              | State<br>AZ | Zip Code<br>85256-4019               | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00  |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>SEAGREN, LOWELL, , ,</b>                                                                |             |                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 7573 E WINNESHIEK RD                                                                                                            |             |                                      | Transaction ID : A7D54768A3D164540A50                      |  |
| City<br>RIDOTT                                                                                                                                  | State<br>IL | Zip Code<br>61067-9750               | Amount of Each Receipt this Period<br>250.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                            |                                                            |  |
| Name of Employer<br>SELF EMPLOYED                                                                                                               |             | Occupation<br>FARMER                 |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>250.00   |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                      | 1250.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                      |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>SHANEYFELT, GWEN, , ,</b>                                                               |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 29 / 2023 |  |
| Mailing Address 5730 E MIRAMONTE DR S                                                                                                           |             |                                                      | Transaction ID : AF9015FB4BAC94044893                      |  |
| City<br>CAVE CREEK                                                                                                                              | State<br>AZ | Zip Code<br>85331-8554                               | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>FRANKLIN TEMPLETON                                                                                                          |             | Occupation<br>CHIEF ACCOUNTING OFFICER               |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>500.00                   |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : AFFAB60FFB94D43F5A72                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>SHUMACK, TUCKER, , ,</b>                                                                |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 01 / 2023 |  |
| Mailing Address 2346 S NASH ST                                                                                                                  |             |                                                      | Transaction ID : AC81E1A9678024C70B7F                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22202-1548                               | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>OGILVY GOVERNMENT RELATIONS                                                                                                 |             | Occupation<br>LOBBYIST                               |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00                  |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 1000.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                                           |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                                           | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 06 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                                           | Transaction ID : A5B8F1458EFB345EEA5D                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                                                    | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                                            |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                                      |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>SHUMACK, TUCKER, , ,</b>                                                                |             |                                                                           | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 2346 S NASH ST                                                                                                                  |             |                                                                           | Transaction ID : AE6848AB35196428FBE3                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22202-1548                                                    | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>OGILVY GOVERNMENT RELATIONS<br>Occupation<br>LOBBYIST |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1500.00                                       |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                                           | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                                           | Transaction ID : A30C74BF7F4744E47AC0                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                                                    | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                                            |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                                      |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                                           | 500.00                                                     |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                                           |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS, PETER, , ,**

Mailing Address 346 MIAMI AVE

|                     |             |                        |
|---------------------|-------------|------------------------|
| City<br>INDIALANTIC | State<br>FL | Zip Code<br>32903-3521 |
|---------------------|-------------|------------------------|

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

|                                        |                        |
|----------------------------------------|------------------------|
| Name of Employer<br>WABTEC CORPORATION | Occupation<br>STRATEGY |
|----------------------------------------|------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 06 / 2023

Transaction ID : A6B4A6D66CE0A402FBD2

Amount of Each Receipt this Period  
500.00

☐ Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>ARLINGTON | State<br>VA | Zip Code<br>22219-1891 |
|-------------------|-------------|------------------------|

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

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
56362.21

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 13 / 2023

Transaction ID : A7488F6494DF7455ABB0

Amount of Each Receipt this Period  
500.00

☒ Memo Item  
INTERMEDIARY  
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**TRIOLO, JACOB, , ,**

Mailing Address 333 A ST NE  
STE 675E

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20002-5910 |
|--------------------|-------------|------------------------|

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

|                                          |                        |
|------------------------------------------|------------------------|
| Name of Employer<br>CAPITOL TAX PARTNERS | Occupation<br>ATTORNEY |
|------------------------------------------|------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 28 / 2023

Transaction ID : ACAFB26F8CC3A408895B

Amount of Each Receipt this Period  
1500.00

☐ Memo Item  
EARMARKED (NON-DIRECTED) THROUGH WINRED

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

|         |
|---------|
| 2000.00 |
|---------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                                   |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                                   | Transaction ID : ABB40B8E277904E38B06                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                                            | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                                    |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                              |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>TROMBLEY, GINA, , ,</b>                                                                 |             |                                                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 01 / 2023 |  |
| Mailing Address 38 SHINGLE HOUSE RD                                                                                                             |             |                                                                   | Transaction ID : A793B003205B44EFC969                      |  |
| City<br>MILLWOOD                                                                                                                                | State<br>NY | Zip Code<br>10546-1040                                            | Amount of Each Receipt this Period<br>750.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation<br>WABTEC CHIEF COMMERCIAL OFFICER |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>750.00                                |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 06 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                                   | Transaction ID : A7DB1B6DE23644B93B8D                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                                            | Amount of Each Receipt this Period<br>750.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                                    |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                              |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                                   | 750.00                                                     |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                                   |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                      |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WALTERS, ROBERT, , ,</b>                                                                |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 684 PIERCE ST                                                                                                                   |             |                                                      | Transaction ID : A0D4832792E254E69A7D                      |  |
| City<br>BIRMINGHAM                                                                                                                              | State<br>MI | Zip Code<br>48009-3647                               | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>EARMARKED (NON-DIRECTED) THROUGH WINRED |                                                            |  |
| Name of Employer<br>ROCKET MORTGAGE                                                                                                             |             | Occupation<br>CEO                                    |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>3300.00                  |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                      | Transaction ID : AD8A7343E8382462EBFB                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                               | Amount of Each Receipt this Period<br>3300.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br>INTERMEDIARY                            |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                                           |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>WEED, BEVERLY, L., ,</b>                                                                |             |                                                      | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 4702 BROADWAY ST                                                                                                                |             |                                                      | Transaction ID : A5D4BC2DD7CB1413AA2A                      |  |
| City<br>PEKIN                                                                                                                                   | State<br>IL | Zip Code<br>61554-9442                               | Amount of Each Receipt this Period<br>250.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                                            |                                                            |  |
| Name of Employer<br>NONE                                                                                                                        |             | Occupation<br>RETIRED                                |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>250.00                   |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                      | 3550.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                      |                                                            |  |

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

PAGE 45 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WHITNEY, LINDA, B., ,

Mailing Address 102 N TOWNE AVE

City

ELMWOOD

State

IL

Zip Code

61529-9541

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 30 2023

Transaction ID : A7EC5C7BEC54A48CF8F5

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILLCOX, LAWRENCE, , ,

Mailing Address 9325 RENSHAW DR

City

BETHESDA

State

MD

Zip Code

20817-2227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPITOL TAX PARTNERS

Occupation

ATTORNEY

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 29 2023

Transaction ID : A3161310CA1F449C89F3

Amount of Each Receipt this Period

1500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

56362.21

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : A73898A62EA2A4C1D855

Amount of Each Receipt this Period

1500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 163

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WOOD, ROBERT, , ,**

Mailing Address 601 13TH ST NW

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20005-3807 |
|--------------------|-------------|------------------------|

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

|                               |                          |
|-------------------------------|--------------------------|
| Name of Employer<br>BGR GROUP | Occupation<br>CONSULTANT |
|-------------------------------|--------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 28 / 2023          |

Transaction ID : AEEE776C93DFF44CE8BE

Amount of Each Receipt this Period

|         |
|---------|
| 1500.00 |
|---------|

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

Mailing Address PO BOX 9891

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>ARLINGTON | State<br>VA | Zip Code<br>22219-1891 |
|-------------------|-------------|------------------------|

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

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
56362.21

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : A9FF23C9F9666481E859

Amount of Each Receipt this Period

|         |
|---------|
| 1500.00 |
|---------|

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**WORTH, BRIAN, , ,**

Mailing Address 2201 S BUCHANAN ST

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>ARLINGTON | State<br>VA | Zip Code<br>22206-1074 |
|-------------------|-------------|------------------------|

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

|                                           |                          |
|-------------------------------------------|--------------------------|
| Name of Employer<br>FRANKLIN SQUARE GROUP | Occupation<br>CONSULTANT |
|-------------------------------------------|--------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 16 / 2023          |

Transaction ID : A6B0B87DE7EC04BCD8C3

Amount of Each Receipt this Period

|         |
|---------|
| 1500.00 |
|---------|

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

|         |
|---------|
| 3000.00 |
|---------|

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

PAGE 47 OF 163

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                                         |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>WINRED</b>                                                                              |             |                                                                         | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 20 / 2023 |  |
| Mailing Address PO BOX 9891                                                                                                                     |             |                                                                         | Transaction ID : A10D0A58E94BE46139A0                      |  |
| City<br>ARLINGTON                                                                                                                               | State<br>VA | Zip Code<br>22219-1891                                                  | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>56362.21                                    |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>ZIEBART, LORI, , ,</b>                                                                  |             |                                                                         | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 1010 SEMINOLE DR<br>APT 1012                                                                                                    |             |                                                                         | Transaction ID : AD0B8F7F1569245A6912                      |  |
| City<br>FORT LAUDERDALE                                                                                                                         | State<br>FL | Zip Code<br>33304-3220                                                  | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation<br>ZIEBART CONSULTING, LLC<br>CONSULTANT |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00                                     |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)                                                                                               |             |                                                                         | Date of Receipt<br>M M / D D / Y Y Y Y Y                   |  |
| Mailing Address                                                                                                                                 |             |                                                                         |                                                            |  |
| City                                                                                                                                            | State       | Zip Code                                                                | Amount of Each Receipt this Period                         |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Name of Employer<br>Occupation                                          |                                                            |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |             | Election Cycle-to-Date ▼                                                |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                                         | 1000.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                                         | 119212.00                                                  |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**ABBOTT LABORATORIES EMPLOYEE PAC**

Mailing Address 100 ABBOTT PARK RD

City  
ABBOTT PARKState  
ILZip Code  
60064-3502FEC ID number of contributing  
federal political committee.**C** C00040279

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A4C34792F86A24679A1A

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**ABBVIE POLITICAL ACTION COMMITTEE**

Mailing Address 1 N WAUKEGAN RD

City  
NORTH CHICAGOState  
ILZip Code  
60064-1802FEC ID number of contributing  
federal political committee.**C** C00536573

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A7B4748DE82BC414AB79

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE)**

Mailing Address 4301 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22203-4419FEC ID number of contributing  
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  |   | 23  |   | 2023        |

Transaction ID : A3705E5E2C31C494895E

Amount of Each Receipt this Period

1000.00

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

11000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**ALLSTATE INSURANCE COMPANY PAC**  
Mailing Address 2775 SANDERS ROAD SUITE A2W

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| NORTHBROOK | IL    | 60062    |

FEC ID number of contributing  
federal political committee.**C** C00040253

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A37BA0A48FEBF41C490C

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**ALZHEIMERS IMPACT MOVEMENT PAC**  
Mailing Address 225 N MICHIGAN AVE  
STE 1700

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| CHICAGO | IL    | 60601-7652 |

FEC ID number of contributing  
federal political committee.**C** C00486928

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 15  |   | 2023        |

Transaction ID : A231035396A0547EE988

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKINPAC)  
Mailing Address 1445 NEW YORK AVE NW  
STE 800

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| WASHINGTON | DC    | 20005-2125 |

FEC ID number of contributing  
federal political committee.**C** C00359539

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : AC5ED7A0EEDC74D36A33

Amount of Each Receipt this Period

2500.00

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

6000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF FAMILY PHYSICIANS POLITICAL ACTION COMMITTEE****A.** Mailing Address 1133 CONNECTICUT AVE NW  
STE 1100

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20036-4342 |
|--------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee. **C** C00411553

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : A78F5D21C0C5045619F8

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF NEUROLOGY BRAINPAC**

Mailing Address 401 C ST NE

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20002-5817 |
|--------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee. **C** C00435933

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 30 / 2023          |

Transaction ID : A0E5A2A7A9D134671BD0

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (OPHTHPAC)**

Mailing Address 655 BEACH ST

|                       |             |                        |
|-----------------------|-------------|------------------------|
| City<br>SAN FRANCISCO | State<br>CA | Zip Code<br>94109-1342 |
|-----------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : A1260AFBD1111457F804

Amount of Each Receipt this Period

1000.00

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

|         |
|---------|
| 3000.00 |
|         |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF PHYSICIAN ASSOCIATES PAC (PA PAC)**Mailing Address 2318 MILL RD  
STE 1300

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>ALEXANDRIA | State<br>VA | Zip Code<br>22314-6868 |
|--------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee. **C** C00122499

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : A9FF145E2CC3144BC9C6

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROSURGERYPAC)**

Mailing Address 25 MASSACHUSETTS AVE NW

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20001-1430 |
|--------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee. **C** C00413955

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 30 / 2023          |

Transaction ID : AD49C99EFB4E64197AF5

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20036 |
|--------------------|-------------|-------------------|

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

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 15 / 2023          |

Transaction ID : ABBE3B72971304418B74

Amount of Each Receipt this Period

2500.00

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

|         |
|---------|
| 7500.00 |
|---------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. AMERICAN CHEMISTRY COUNCIL PAC</b>                                                             |                                     |
| Mailing Address 700 2ND STREET, NE<br>ATTN: ALLISON STARMANN                                                                                    |                                     |
| City<br>WASHINGTON                                                                                                                              | State<br>DC                         |
| Zip Code<br>20002                                                                                                                               |                                     |
| FEC ID number of contributing federal political committee.                                                                                      | <b>C</b> C00252338                  |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2500.00 |

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

Transaction ID : AD98A648F90474A83B3C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. AMERICAN COLLEGE OF CARDIOLOGY POLITICAL ACTION COMMITTEE</b>                                  |                                     |
| Mailing Address 2400 N ST NW                                                                                                                    |                                     |
| City<br>WASHINGTON                                                                                                                              | State<br>DC                         |
| Zip Code<br>20037                                                                                                                               |                                     |
| FEC ID number of contributing federal political committee.                                                                                      | <b>C</b> C00375360                  |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>5000.00 |

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2023    |

Transaction ID : AFF5B90FF7D54409E9B0

Amount of Each Receipt this Period

5000.00

☐ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIATION PAC</b>                                  |                                     |
| Mailing Address 20 F ST NW, STE 1000<br>ATTN: SARA MORSE                                                                                        |                                     |
| City<br>WASHINGTON                                                                                                                              | State<br>DC                         |
| Zip Code<br>20001                                                                                                                               |                                     |
| FEC ID number of contributing federal political committee.                                                                                      | <b>C</b> C00382424                  |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00 |

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

Transaction ID : A005A2A3446154BA8870

Amount of Each Receipt this Period

1000.00

☐ Memo Item

8500.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC PAC)**Mailing Address 1015 15TH STREET, NW  
8TH FLOORCity  
WASHINGTONState  
DCZip Code  
20005-2605FEC ID number of contributing  
federal political committee.**C** C00010868

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : A7A46B5B366724009AE4

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE**Mailing Address 101 CONSTITUTION AVE NW  
STE 700City  
WASHINGTONState  
DCZip Code  
20001-2133FEC ID number of contributing  
federal political committee.**C** C00147066

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : AF59D4E55131544EC9D5

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN DENTAL POLITICAL ACTION COMMITTEE**Mailing Address 1111 14TH STREET, NW  
STE 1100City  
WASHINGTONState  
DCZip Code  
20005-5627FEC ID number of contributing  
federal political committee.**C** C00000729

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : ACD65A50653C64FF59F7

Amount of Each Receipt this Period

2500.00

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

12500.00

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

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

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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**AMERICAN PSYCHIATRIC ASSOCIATION POLITICAL ACTION COMMITTEE**Mailing Address 800 MAINE AVE SW  
SUITE 900City  
WASHINGTONState  
DCZip Code  
20024FEC ID number of contributing  
federal political committee.**C** C00373696

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : AE44D7BEF2D9F46C8BE3

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC**

Mailing Address 1061 AMERICAN LN

City  
SCHAUMBURGState  
ILZip Code  
60173-4973FEC ID number of contributing  
federal political committee.**C** C00255752

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A1BC6FCB6EC63458B9F6

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SUNTANNING ASSOCIATION PAC**

Mailing Address 3101 PAGE AVE

City  
JACKSONState  
MIZip Code  
49203-2254FEC ID number of contributing  
federal political committee.**C** C00563015

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 01  |   | 31  |   | 2023        |

Transaction ID : AFE677087711841319B4

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**AMGEN INC. POLITICAL ACTION COMMITTEE**Mailing Address 601 13TH ST NW  
FL 12City  
WASHINGTONState  
DCZip Code  
20005-3819FEC ID number of contributing  
federal political committee.**C** C00251876

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A849322D7655245389F7

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**AMSTED INDUSTRIES INCORPORATED PAC**Mailing Address 180 N STETSON AVE  
STE 1800City  
CHICAGOState  
ILZip Code  
60601-6808FEC ID number of contributing  
federal political committee.**C** C00438358

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  |   | 08  |   | 2023        |

Transaction ID : AC5013FC10E3049EFA80

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**ARCHIPAC -THE AMERICAN INSTITUTE OF ARCHITECTS**

Mailing Address 1735 NEW YORK AVE NW

City  
WASHINGTONState  
DCZip Code  
20006-5209FEC ID number of contributing  
federal political committee.**C** C00139071

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A078C4911B8CC4D1CBF6

Amount of Each Receipt this Period

2500.00

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

6000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**ARCOSA, INC. EMPLOYEE PAC**Mailing Address 500 N AKARD ST  
STE 400City  
DALLASState  
TXZip Code  
75201-3332FEC ID number of contributing  
federal political committee.**C** C00689380

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  |   | 23  |   | 2023        |

Transaction ID : A44C73ACA21554CB68E7

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**ASTELLAS US LLC PAC (ASTELLAS PAC)**

Mailing Address 1 ASTELLAS WAY

City  
NORTHBROOKState  
ILZip Code  
60062-6111FEC ID number of contributing  
federal political committee.**C** C00444885

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A0132424A9D9E44D1A06

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**BAKER & HOSTETLER PAC**Mailing Address 1050 CONNECTICUT AVE NW  
STE 1100City  
WASHINGTONState  
DCZip Code  
20036-5318FEC ID number of contributing  
federal political committee.**C** C00174227

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 15  |   | 2023        |

Transaction ID : A9C9F07BB18B346AABB6

Amount of Each Receipt this Period

1000.00

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

4500.00

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



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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BOEING COMPANY POLITICAL ACTION COMMITTEE**

Mailing Address 929 LONG BRIDGE DR

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>ARLINGTON | State<br>VA | Zip Code<br>22202-4208 |
|-------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00142711

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : A4C315DCCB2584839A6A

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BRISTOL-MYERS SQUIBB CO. EMPLOYEE POLITICAL ADVOCACY FUND FOR INNOVATION**

Mailing Address 3401 PRINCETON PIKE

|                       |             |                        |
|-----------------------|-------------|------------------------|
| City<br>LAWRENCEVILLE | State<br>NJ | Zip Code<br>08648-1205 |
|-----------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00035675

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 23 / 2023          |

Transaction ID : A308EE2AABBA54F459BB

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CASE NEW HOLLAND INDUSTRIAL INC. EXCELLENCE IN GOVERNMENT FUND (CNH INDUSTRIAL EXCELLENCE IN GOVE...**

Mailing Address 1001 G ST NW  
SUITE 100-EAST

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20001-4545 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00303883

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 30 / 2023          |

Transaction ID : A189F5D19C23B4E13A87

Amount of Each Receipt this Period

|         |
|---------|
| 5000.00 |
|---------|

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

|         |
|---------|
| 7000.00 |
|---------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**CHEVRON EMPLOYEES PAC**

Mailing Address PO BOX 6016

City  
SAN RAMONState  
CAZip Code  
94583-0716FEC ID number of contributing  
federal political committee.**C** C00035006

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : AE00568782A9E4F939BE

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**CHUBB GROUP HOLDINGS INC. PAC**Mailing Address 436 WALNUT ST  
WA04PCity  
PHILADELPHIAState  
PAZip Code  
19106-3703FEC ID number of contributing  
federal political committee.**C** C00348938

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : A654A77A7781A49CFA78

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)**

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00008474

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A0CFF31574B714953914

Amount of Each Receipt this Period

2000.00

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

9500.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. CME GROUP INC. PAC</b>                                                                         |                                            |
| Mailing Address 20 S WACKER DR                                                                                                                  |                                            |
| City<br>CHICAGO                                                                                                                                 | State<br>IL Zip Code<br>60606-7431         |
| FEC ID number of contributing federal political committee.<br><b>C C00076299</b>                                                                |                                            |
| Name of Employer                                                                                                                                | Occupation                                 |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br><b>5000.00</b> |

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 28  |   | 2023        |

Transaction ID : A95C72E0F261540E29B0

Amount of Each Receipt this Period

|         |
|---------|
| 5000.00 |
|---------|

☐ Memo Item

|                                                                                                                                                 |                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B. CONSTELLATION BRANDS INC. POLITICAL ACTION COMMITTEE</b>                                       |                                            |
| Mailing Address 207 HIGH POINT DR<br>BLDG 100                                                                                                   |                                            |
| City<br>VICTOR                                                                                                                                  | State<br>NY Zip Code<br>14564-1061         |
| FEC ID number of contributing federal political committee.<br><b>C C00304832</b>                                                                |                                            |
| Name of Employer                                                                                                                                | Occupation                                 |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br><b>5000.00</b> |

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 02  |   | 2023        |

Transaction ID : A22D1094974FC4FED9A5

Amount of Each Receipt this Period

|         |
|---------|
| 5000.00 |
|---------|

☐ Memo Item

|                                                                                                                                                 |                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C. CONSTELLATION ENERGY CORPORATION EMPLOYEE PAC (CEPAC)</b>                                      |                                            |
| Mailing Address 101 CONSTITUTION AVE NW<br>STE 400                                                                                              |                                            |
| City<br>WASHINGTON                                                                                                                              | State<br>DC Zip Code<br>20001-2133         |
| FEC ID number of contributing federal political committee.<br><b>C C00793711</b>                                                                |                                            |
| Name of Employer                                                                                                                                | Occupation                                 |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br><b>5000.00</b> |

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A89DEE2883FC34B1587E

Amount of Each Receipt this Period

|         |
|---------|
| 5000.00 |
|---------|

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

|          |
|----------|
| 15000.00 |
|----------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>CONSUMER HEALTHCARE PRODUCTS ASSOCIATION PAC</b>                                        |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 1625 I STREET, NW<br>STE 600                                                                                                    |             |                                     | Transaction ID : AB96DAEB779DA4E1C8F6                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20006-4017              | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00040584                                                                       |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2500.00 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>CSL EMPLOYEES PAC</b>                                                                   |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 02 / 2023 |  |
| Mailing Address 1020 1ST AVE                                                                                                                    |             |                                     | Transaction ID : A2E7C91B08958496991F                      |  |
| City<br>KING OF PRUSSIA                                                                                                                         | State<br>PA | Zip Code<br>19406-1310              | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00422501                                                                       |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2500.00 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>DELL TECHNOLOGIES POLITICAL ACTION COMMITTEE</b>                                        |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 15 / 2023 |  |
| Mailing Address 440 FIRST ST, NW<br>SUITE 820                                                                                                   |             |                                     | Transaction ID : A23F364E6993F4E3FA2F                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20001                   | Amount of Each Receipt this Period<br>5000.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00369751                                                                       |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>5000.00 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                     | 10000.00                                                   |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                     |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>EISAI INC. PAC</b>                                                                                |                                     |
| Mailing Address 200 METRO BLVD                                                                                                                  |                                     |
| City<br>NUTLEY                                                                                                                                  | State<br>NJ                         |
| Zip Code<br>07110-6102                                                                                                                          |                                     |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00429886                                                                |                                     |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00 |

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 23  |   | 2023        |

Transaction ID : A4B842591860048E489A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC</b>                                                 |                                     |
| Mailing Address 2980 FAIRVIEW PARK DR                                                                                                           |                                     |
| City<br>FALLS CHURCH                                                                                                                            | State<br>VA                         |
| Zip Code<br>22042-4511                                                                                                                          |                                     |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00088591                                                                |                                     |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00 |

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A405D7A26457D4B1FB30

Amount of Each Receipt this Period

1000.00

☐ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>EMPLOYEES OF RAYTHEON TECHNOLOGIES CORPORATION PAC</b>                                            |                                     |
| Mailing Address 1101 PENNSYLVANIA AVE NW<br>FL 10                                                                                               |                                     |
| City<br>WASHINGTON                                                                                                                              | State<br>DC                         |
| Zip Code<br>20004-2566                                                                                                                          |                                     |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00097568                                                                |                                     |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00 |

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : A5DC0364085DD4530B4E

Amount of Each Receipt this Period

1000.00

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

|         |
|---------|
| 3000.00 |
|         |

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A.** EXXON MOBIL CORPORATION-MOBIL POLITICAL ACTION COMMITTEE

Mailing Address 5959 LAS COLINAS BLVD

City  
IRVINGState  
TXZip Code  
75039FEC ID number of contributing  
federal political committee.

C C00121368

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : A67C03FB3BD3A4E50AEF

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** FEDERATION OF AMERICAN HOSPITALS PACMailing Address 750 9TH ST NW  
STE 600City  
WASHINGTONState  
DCZip Code  
20001-4595FEC ID number of contributing  
federal political committee.

C C00002261

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2023

Transaction ID : A1B998FF4DF84429E872

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)Mailing Address 200 SEAPORT BLVD  
# V9BCity  
BOSTONState  
MAZip Code  
02210-2031FEC ID number of contributing  
federal political committee.

C C00380550

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 30 2023

Transaction ID : AACCB60F865340D1880

Amount of Each Receipt this Period

2500.00

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

10000.00

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>FRESENIUS MEDICAL CARE NORTH AMERICA PAC</b>                                            |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 801 PENNSYLVANIA AVENUE, NW<br>SUITE 255                                                                                        |             |                                     | Transaction ID : A64C42B6898ED40DE8D1                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20004                   | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00401299                                                                       |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2500.00 |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>GILEAD SCIENCES INC HEALTHCARE POLICY PAC</b>                                           |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 30 / 2023 |  |
| Mailing Address 333 LAKESIDE DR                                                                                                                 |             |                                     | Transaction ID : AB06169AB6BB14ABC989                      |  |
| City<br>FOSTER CITY                                                                                                                             | State<br>CA | Zip Code<br>94404-1147              | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00396895                                                                       |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2500.00 |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>GO PAC GO</b>                                                                           |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>01 / 31 / 2023 |  |
| Mailing Address 824 MILLEDGE CIR<br>STE 101                                                                                                     |             |                                     | Transaction ID : A2B7047B0C2C645DDA1E                      |  |
| City<br>ATHENS                                                                                                                                  | State<br>GA | Zip Code<br>30606                   | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00657262                                                                       |             | Memo Item <input type="checkbox"/>  |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                          |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2500.00 |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                     | 7500.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                     |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GROWTH ENERGY PAC**

Mailing Address 701 8TH ST NW  
STE 450

City WASHINGTON State DC Zip Code 20001-3937

FEC ID number of contributing federal political committee. **C** C00475665

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 23  |   | 2023    |

Transaction ID : A835AB4C07A3144C9893

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
GUARDIAN LIFE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (GUARDIAN LIFE FEDERAL PAC)

Mailing Address 8300 BOONE BLVD

City VIENNA State VA Zip Code 22182-2626

FEC ID number of contributing federal political committee. **C** C00173393

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 15  |   | 2023    |

Transaction ID : A931382F68514483980A

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
HEALTH CARE SERVICE CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 300 E RANDOLPH ST  
LEGAL DEPARTMENT

City CHICAGO State IL Zip Code 60601-5014

FEC ID number of contributing federal political committee. **C** C00199711

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2023    |

Transaction ID : A7B3B2FB85EBA4CEE86D

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)..... ▶

|          |
|----------|
| 11000.00 |
|----------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**Full Name (Last, First, Middle Initial)  
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC POLITICAL ACTION COMMITTEE**A.**Mailing Address 20 F ST NW  
STE 610City  
WASHINGTONState  
DCZip Code  
20001-6707FEC ID number of contributing  
federal political committee.**C** C00022343

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : AC76A173A262A4BD396C

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**Full Name (Last, First, Middle Initial)  
INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)Mailing Address 555 12TH ST NW  
STE 660City  
WASHINGTONState  
DCZip Code  
20004-1241FEC ID number of contributing  
federal political committee.**C** C00217638

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 15  |   | 2023        |

Transaction ID : AF31AFBA70D284BE09C4

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**Full Name (Last, First, Middle Initial)  
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)Mailing Address 1401 H ST NW  
STE 1200City  
WASHINGTONState  
DCZip Code  
20005-2110FEC ID number of contributing  
federal political committee.**C** C00105981

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A5F80488686A245D3868

Amount of Each Receipt this Period

1000.00

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

8500.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**Full Name (Last, First, Middle Initial)  
JACKSON HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COMPANY FEDERAL SSF (JACKSON NATIONAL FE...**A.** Mailing Address 1 CORPORATE WAY

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| LANSING | MI    | 48951-1001 |

FEC ID number of contributing  
federal political committee. **C** C00686055

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 01  |   | 31  |   | 2023        |

Transaction ID : A5A7195A6EC314AA4A57

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
JACKSON HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COMPANY SEPARATE SEGREGATED FUND (JACKSO...**B.** Mailing Address 1 CORPORATE WAY

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| LANSING | MI    | 48951-1001 |

FEC ID number of contributing  
federal political committee. **C** C00254953

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : AF0F702467A88450495F

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
**JPMORGAN CHASE & CO. FEDERAL POLITICAL ACTION COMMITTEE****C.** Mailing Address 601 PENNSYLVANIA AVENUE, NW  
7TH FLOOR

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

FEC ID number of contributing  
federal political committee. **C** C00104299

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : AD0F5C213666A4D5384A

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)..... ►

|         |
|---------|
| 6000.00 |
|---------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**LINCARE HOLDINGS, INC. EMPLOYEE ACTION FUND**  
Mailing Address 19387 US HIGHWAY 19 N

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| CLEARWATER | FL    | 33764-3102 |

FEC ID number of contributing  
federal political committee. **C** C00653477

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 15  |   | 2023        |

Transaction ID : AB9EF7819222E493882D

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      | State | Zip Code   |
| ARLINGTON | VA    | 22202-3706 |

FEC ID number of contributing  
federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A4DE2165B2EAE44EF99E

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**LUNDBECK LLC EMPLOYEE POLITICAL ACTION COMMITTEE**  
Mailing Address 6 PARKWAY NORTH BLVD  
STE 400

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| DEERFIELD | IL    | 60015-2522 |

FEC ID number of contributing  
federal political committee. **C** C00491118

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 02  |   | 2023        |

Transaction ID : A07ADB98B4268402298C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**MARSH & MCLENNAN COMPANIES, INC. PAC (MMCPAC)**  
Mailing Address 1166 AVENUE OF THE AMERICAS

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| NEW YORK | NY    | 10036-2708 |

FEC ID number of contributing  
federal political committee.**C** C00457234

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : A8CB7F08370B34B2897C

Amount of Each Receipt this Period

1750.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)**  
Mailing Address 601 PENNSYLVANIA AVE NW  
NORTH BUILDING, SUITE 1200

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| WASHINGTON | DC    | 20004-2601 |

FEC ID number of contributing  
federal political committee.**C** C00097485

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 15  |   | 2023        |

Transaction ID : A3616B5AA56034920B12

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**METLIFE INC. EMPLOYEES' POLITICAL PARTICIPATION FUND A**  
Mailing Address 200 PARK AVE

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| NEW YORK | NY    | 10166-0005 |

FEC ID number of contributing  
federal political committee.**C** C00040923

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 23  |   | 2023        |

Transaction ID : A66572F8B4F5B45C8902

Amount of Each Receipt this Period

2500.00

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

5250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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|                              |                              |                                         |                              |
|------------------------------|------------------------------|-----------------------------------------|------------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| 12                           | 13a                          | 13b                                     | 14                           |
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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**MIKE GALLAGHER FOR WISCONSIN**  
Mailing Address PO BOX 1027

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| GREEN BAY | WI    | 54305-1027 |

FEC ID number of contributing  
federal political committee.**C** C00610212

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 31  |   | 2023    |

Transaction ID : AAC04A69C81204184B37

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**MIKE GALLAGHER FOR WISCONSIN**  
Mailing Address PO BOX 1027

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| GREEN BAY | WI    | 54305-1027 |

FEC ID number of contributing  
federal political committee.**C** C00610212

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 31  |   | 2023    |

Transaction ID : A419E506696304C7E9DB

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**MOLINA HEALTHCARE, INC. PAC**  
Mailing Address 200 OCEANGATE  
STE 100

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| LONG BEACH | CA    | 90802-4317 |

FEC ID number of contributing  
federal political committee.**C** C00430256

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 02  |   | 2023    |

Transaction ID : A9D9F4E6FBB904851A99

Amount of Each Receipt this Period

5000.00

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

7500.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>MORGAN STANLEY POLITICAL ACTION COMMITTEE</b>                                                     |                                     |
| Mailing Address 401 9TH ST NW<br>STE 650                                                                                                        |                                     |
| City<br>WASHINGTON                                                                                                                              | State<br>DC                         |
| Zip Code<br>20004-2151                                                                                                                          |                                     |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00337626                                                                |                                     |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2500.00 |

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

Transaction ID : A1D16D74BC66C46B3AAE

Amount of Each Receipt this Period

2500.00

☐ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>MOTOROLA SOLUTIONS, INC. POLITICAL ACTION COMMITTEE</b>                                           |                                     |
| Mailing Address 1455 PENNSYLVANIA AVE NW<br>STE 900                                                                                             |                                     |
| City<br>WASHINGTON                                                                                                                              | State<br>DC                         |
| Zip Code<br>20004-1016                                                                                                                          |                                     |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00075341                                                                |                                     |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>5000.00 |

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

Transaction ID : A3BE21B6E195F4447949

Amount of Each Receipt this Period

5000.00

☐ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM</b>                |                                     |
| Mailing Address 2901 TELESTAR CT                                                                                                                |                                     |
| City<br>FALLS CHURCH                                                                                                                            | State<br>VA                         |
| Zip Code<br>22042-1260                                                                                                                          |                                     |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00005249                                                                |                                     |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>5000.00 |

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 08  |   | 2023    |

Transaction ID : AAC2738C2FF3049C3BAA

Amount of Each Receipt this Period

5000.00

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

|          |
|----------|
| 12500.00 |
|----------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**  
Mailing Address 430 NORTH MICHIGAN AVENUE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| CHICAGO | IL    | 60611    |

FEC ID number of contributing  
federal political committee.**C** C00030718

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 24  |   | 2023    |

Transaction ID : AF6E454BFBCB94DFF99C

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION PAC (NBWA PAC)**  
Mailing Address 1101 KING ST  
STE 600

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| ALEXANDRIA | VA    | 22314-2965 |

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

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

Transaction ID : AE3E60E7A64BE4F13B4B

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION PAC**  
Mailing Address 3 BETHESDA METRO CTR  
STE 1100

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| BETHESDA | MD    | 20814-6302 |

FEC ID number of contributing  
federal political committee.**C** C00113811

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2023    |

Transaction ID : AB79514590FCF43BFB1E

Amount of Each Receipt this Period

2500.00

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

7000.00

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE**  
Mailing Address 1125 EXECUTIVE CIR

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| IRVING | TX    | 75038-2522 |

FEC ID number of contributing  
federal political committee.**C** C00140061

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

Transaction ID : A8D333A8A01BA49C2988

Amount of Each Receipt this Period

1500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL PRO-LIFE ALLIANCE PAC**  
Mailing Address 5211 PORT ROYAL RD  
STE 500

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| SPRINGFIELD | VA    | 22151-2100 |

FEC ID number of contributing  
federal political committee.**C** C00358051

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 07  |   | 2023    |

Transaction ID : A8FE35174156B4203A24

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL PROPANE GAS ASSOCIATION POLITICAL ACTION COMMITTEE**  
Mailing Address 1899 L ST NW  
STE 350

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| WASHINGTON | DC    | 20036-3870 |

FEC ID number of contributing  
federal political committee.**C** C00079681

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 08  |   | 2023    |

Transaction ID : AC829A2FFA1B44D5E93A

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ROOFING CONTRACTORS ASSOCIATION ROOF PAC**  
Mailing Address 324 4TH ST NE

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| WASHINGTON | DC    | 20002-5824 |

FEC ID number of contributing  
federal political committee. **C** C00244863

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : A06A30AFA92D44972B9E

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**NETJETS ASSOCIATION OF SHARED AIRCRAFT PILOTS PAC; NJASAP PAC**  
Mailing Address 2740 AIRPORT DRIVE  
SUITE 330

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| COLUMBUS | OH    | 43219    |

FEC ID number of contributing  
federal political committee. **C** C00488262

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 01  |   | 07  |   | 2023        |

Transaction ID : AD9AC166A907442FAAB8

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE**  
Mailing Address 801 PENNSYLVANIA AVE NW  
STE 220

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| WASHINGTON | DC    | 20004-2679 |

FEC ID number of contributing  
federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : A838B8851AC3948AD815

Amount of Each Receipt this Period

2500.00

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

|         |
|---------|
| 4500.00 |
|---------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**NIKE INC FEDERAL POLITICAL ACTION COMMITTEE (NIKE FEDERAL PAC)**  
Mailing Address 1 SW BOWERMAN DR

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| BEAVERTON | OR    | 97005-0979 |

FEC ID number of contributing  
federal political committee.**C** C00142786

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A9652BD93483442979F4

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**NOVARTIS CORPORATION PAC**  
Mailing Address 801 PENNSYLVANIA AVE NW  
STE 700

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| WASHINGTON | DC    | 20004-2723 |

FEC ID number of contributing  
federal political committee.**C** C00033969

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 15  |   | 2023        |

Transaction ID : A6EF4DB876A3F425EA5F

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**NOVOCURE INC. PAC (A.K.A. NOVOCURE PAC)**  
Mailing Address 1550 LIBERTY RIDGE DR  
STE 115

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| CHESTERBROOK | PA    | 19087-5565 |

FEC ID number of contributing  
federal political committee.**C** C00562546

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  |   | 23  |   | 2023        |

Transaction ID : A3E1F565C9FFA44E6B8E

Amount of Each Receipt this Period

2500.00

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

11000.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**OTSUKA AMERICA PHARMACEUTICAL INC. PAC (OTSUKA US PAC)**  
Mailing Address 2440 RESEARCH BLVD

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| ROCKVILLE | MD    | 20850-3238 |

FEC ID number of contributing  
federal political committee. **C** C00553834

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : A8FABEDE0D5854FCFA14

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**PFIZER INC. PAC**  
Mailing Address 235 EAST 42ND STREET

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| NEW YORK | NY    | 10017    |

FEC ID number of contributing  
federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : AC918D18C0CD84E57B32

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA BETTER GOVERNMENT COMMITTEE**  
Mailing Address 950 F ST NW  
STE 300

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| WASHINGTON | DC    | 20004-1440 |

FEC ID number of contributing  
federal political committee. **C** C00021972

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A3C595FE73466404E9FD

Amount of Each Receipt this Period

1000.00

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

|         |
|---------|
| 3000.00 |
|---------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**Full Name (Last, First, Middle Initial)  
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS**A.** Mailing Address 317 MASSACHUSETTS AVE NE  
FL 1

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20002-5769 |
|--------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : A2CBE9531279A4701AE7

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**QUEST DIAGNOSTICS INCORPORATED PAC**

Mailing Address 500 PLAZA DR

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>SECAUCUS | State<br>NJ | Zip Code<br>07094-3619 |
|------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee. **C** C00329185

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 23 / 2023          |

Transaction ID : A3B28810D2F6E4D83B35

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION PAC**Mailing Address 1101 NEW YORK AVE NW  
FL 8

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20005-4279 |
|--------------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee. **C** C00431312

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : A713A0D25D8B34047973

Amount of Each Receipt this Period

1000.00

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

|         |
|---------|
| 3000.00 |
|         |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SYNGENTA CORPORATION PAC**

Mailing Address 1775 PENNSYLVANIA AVENUE NW  
SUITE 600

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20006-4602 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00363945

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 15 / 2023          |

Transaction ID : AE151852FC1EE4ABF854

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TAKEDA PHARMACEUTICALS AMERICA, INC. POLITICAL ACTION COMMITTEE**

Mailing Address ONE TAKEDA PARKWAY

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>DEERFIELD | State<br>IL | Zip Code<br>60015 |
|-------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C** C00441733

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 30 / 2023          |

Transaction ID : A5983C0BCBF544B1D9F1

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TEACHERS INSURANCE ANNUITY ASSOCIATION OF AMERICA PAC (TIAA PAC)**

Mailing Address 601 13TH ST NW  
STE 700

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>WASHINGTON | State<br>DC | Zip Code<br>20005-3807 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C** C00431361

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

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : A9E9B19C3CC9A4587BBA

Amount of Each Receipt this Period

5000.00

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

|          |
|----------|
| 12500.00 |
|----------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                    |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE                       |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 15 / 2023 |  |
| Mailing Address 701 PENNSYLVANIA AVENUE, NW<br>SUITE 750                                                                                        |             |                                    | Transaction ID : A8C9BF01AEBC941F6A61                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20004                  | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00039578                                                                       |             | Memo Item <input type="checkbox"/> |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                         |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>2500.00  |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>THE GOLDMAN SACHS GROUP, INC. POLITICAL ACTION COMMITTEE                                   |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 31 / 2023 |  |
| Mailing Address 101 CONSTITUTION AVENUE, NW<br>SUITE 1000 EAST                                                                                  |             |                                    | Transaction ID : AABE305693D944F708F6                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20001                  | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00350744                                                                       |             | Memo Item <input type="checkbox"/> |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                         |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>2500.00  |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>THE GREENBRIER COMPANIES, INC. PAC (AKA GREENBRIER PAC)                                    |             |                                    | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 15 / 2023 |  |
| Mailing Address 1 CENTERPOINTE DR<br>STE 200                                                                                                    |             |                                    | Transaction ID : A85CC715A67244E78A07                      |  |
| City<br>LAKE OSWEGO                                                                                                                             | State<br>OR | Zip Code<br>97035-8612             | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C C00711747                                                                       |             | Memo Item <input type="checkbox"/> |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                         |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>2500.00  |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                    | 7500.00                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                    |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**THE HARTFORD FINANCIAL SERVICES GROUP, INC.**Mailing Address 1 HARTFORD PLZ  
HO-1-11City  
HARTFORDState  
CTZip Code  
06155-0001FEC ID number of contributing  
federal political committee.**C** C00511444

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 29 2023

Transaction ID : A6477E729A2D8400D81B

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**THE MOSAIC COMPANY PAC (MOSAICPAC)**

Mailing Address 13830 CIRCA CROSSING DR

City  
LITHIAState  
FLZip Code  
33547-3953FEC ID number of contributing  
federal political committee.**C** C00455766

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 15 2023

Transaction ID : A19F3A7D00A344838837

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**THE NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY FEDERAL PAC**

Mailing Address 720 E WISCONSIN AVE

City  
MILWAUKEEState  
WIZip Code  
53202FEC ID number of contributing  
federal political committee.**C** C00197095

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 23 2023

Transaction ID : ABEF0AB3EBDCA488BB7A

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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

THE OPTIONS CLEARING CORPORATION PAC

A.

Mailing Address 1 N WACKER DR  
STE 500City  
CHICAGOState  
ILZip Code  
60606-2818FEC ID number of contributing  
federal political committee.

C C00255877

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : A9A8A800DC34A4DC4979

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THRIVENT FINANCIAL FOR LUTHERANS - EMPLOYEE POLITICAL ACTION COMMITTEE

B.

Mailing Address POST OFFICE BOX 1892

City  
APPLETONState  
WIZip Code  
54912FEC ID number of contributing  
federal political committee.

C C00121319

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : A702C03D07915406D806

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TRINITY INDUSTRIES EMPLOYEE POLITICAL ACTION COMMITTEE (SF) INC.

C.

Mailing Address 14221 DALLAS PKWY  
STE 1100City  
DALLASState  
TXZip Code  
75254-2957FEC ID number of contributing  
federal political committee.

C C00268904

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 15 2023

Transaction ID : AA51201DD37E842FAAA3

Amount of Each Receipt this Period

2000.00

☐ 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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
TRINITY INDUSTRIES EMPLOYEE POLITICAL ACTION COMMITTEE (SF) INC.Mailing Address 14221 DALLAS PKWY  
STE 1100City  
DALLASState  
TXZip Code  
75254-2957FEC ID number of contributing  
federal political committee.**C** C00268904

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  |   | 15  |   | 2023        |

Transaction ID : A0CE8821FFAA84080BB7

Amount of Each Receipt this Period

3000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)Mailing Address 600 WASHINGTON BLVD  
C/O PER DYRVIKCity  
STAMFORDState  
CTZip Code  
06901-3726FEC ID number of contributing  
federal political committee.**C** C00012245

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 23  |   | 2023        |

Transaction ID : AA049606D20AE48C99C0

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
UNION PACIFIC CORPORATION FUND FOR EFFECTIVE GOVERNMENTMailing Address 700 13TH ST NW  
SUITE 350City  
WASHINGTONState  
DCZip Code  
20005-3960FEC ID number of contributing  
federal political committee.**C** C00010470

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : A5EC0A8A41D944FC7855

Amount of Each Receipt this Period

2500.00

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

10500.00

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**UNITED PARCEL SERVICE INC. PAC**  
Mailing Address 55 GLENLAKE PARKWAY NE

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| ATLANTA | GA    | 30328    |

FEC ID number of contributing  
federal political committee.**C** C00064766

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 30  |   | 2023        |

Transaction ID : A618B62BA3C524985A9A

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**UNITEDHEALTH GROUP INCORPORATED PAC (UNITEDHEALTH GROUP PAC)**  
Mailing Address 701 PENNSYLVANIA AVE NW  
STE 200

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| WASHINGTON | DC    | 20004-3610 |

FEC ID number of contributing  
federal political committee.**C** C00274431

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 31  |   | 2023        |

Transaction ID : A5F07F04C86A046F682B

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**W R BERKLEY CORPORATION POLITICAL ACTION COMMITTEE**  
Mailing Address 475 STEAMBOAT ROAD  
4TH FLOOR

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| GREENWICH | CT    | 06830    |

FEC ID number of contributing  
federal political committee.**C** C00383307

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 02  |   | 2023        |

Transaction ID : A37229DD2BA174FEFB89

Amount of Each Receipt this Period

2500.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT**  
Mailing Address 702 SW 8TH STCity State Zip Code  
BENTONVILLE AR 72716-6209FEC ID number of contributing  
federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2023

Transaction ID : AFAE4103407C84ECCABF

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FARGO EMPLOYEE PAC)**  
Mailing Address 90 S. 7TH STREET MAC N9305-16CCity State Zip Code  
MINNEAPOLIS MN 55402FEC ID number of contributing  
federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2023

Transaction ID : AE2CC0B4304B14C66B4F

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**ZENECA INC. POLITICAL ACTION COMMITTEE (AZ PAC)**  
Mailing Address C/O ZENECA INC.  
1800 CONCORD PIKE, PO BOX 15437City State Zip Code  
WILMINGTON DE 19850FEC ID number of contributing  
federal political committee. **C** C00279455

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2023

Transaction ID : AE143663D766645D4931

Amount of Each Receipt this Period

4000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶6000.00  
284250.00

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                        |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>TEAM LAHOOD</b>                                                                         |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 28 / 2023 |  |
| Mailing Address 824 S MILLEDGE AVE STE 101                                                                                                      |             |                                        | Transaction ID : A4D92B3C54812470E939                      |  |
| City<br>ATHENS                                                                                                                                  | State<br>GA | Zip Code<br>30605                      | Amount of Each Receipt this Period<br>3970.49              |  |
| FEC ID number of contributing federal political committee.<br>C C00619486                                                                       |             | Memo Item<br>TRANSFER OF NET JFC FUNDS |                                                            |  |
| Name of Employer                                                                                                                                |             | Occupation                             |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>80285.43   |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>ANDERSON, JOHN, R., ,</b>                                                               |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 17 / 2023 |  |
| Mailing Address 330 SPRING CREEK RD                                                                                                             |             |                                        | Transaction ID : A93BE652F169948998E5                      |  |
| City<br>ROCKFORD                                                                                                                                | State<br>IL | Zip Code<br>61107-1035                 | Amount of Each Receipt this Period<br>1700.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                              |                                                            |  |
| Name of Employer<br>ANDERSON ENTERPRISES, LLC                                                                                                   |             | Occupation<br>CEO                      |                                                            |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>5000.00    |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>TINERVIN, JEFFREY, M., ,</b>                                                            |             |                                        | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 13 / 2023 |  |
| Mailing Address 1208 BUNN ST                                                                                                                    |             |                                        | Transaction ID : AF617F712BA51417B892                      |  |
| City<br>BLOOMINGTON                                                                                                                             | State<br>IL | Zip Code<br>61701-6917                 | Amount of Each Receipt this Period<br>2500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                              |                                                            |  |
| Name of Employer<br>NONE                                                                                                                        |             | Occupation<br>RETIRED                  |                                                            |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>5800.00    |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                        | 3970.49                                                    |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                        |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**TEAM LAHOOD**  
Mailing Address 824 S MILLEDGE AVE STE 101

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| ATHENS | GA    | 30605    |

FEC ID number of contributing  
federal political committee. **C** C00619486

Name of Employer Occupation

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
80285.43

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  | / | 28  | / | 2023        |

Transaction ID : A902D9532C1684EA2B02

Amount of Each Receipt this Period

31054.86

☐ Memo Item  
TRANSFER OF NET JFC FUNDS**B.** Full Name (Last, First, Middle Initial)  
**BOOK, MICHAEL, , ,**  
Mailing Address 28 CRAWFORD RD

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| WESTPORT | CT    | 06880-1824 |

FEC ID number of contributing  
federal political committee. **C**Name of Employer Occupation  
LENOX ADVISORS FINANCIAL SERVICESReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  | / | 19  | / | 2022        |

Transaction ID : A3A41957BAD4F4D7B86F

Amount of Each Receipt this Period

1000.00

☒ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**ANDERSON, JOHN, R., ,**  
Mailing Address 330 SPRING CREEK RD

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| ROCKFORD | IL    | 61107-1035 |

FEC ID number of contributing  
federal political committee. **C**Name of Employer Occupation  
ANDERSON ENTERPRISES, LLC CEOReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
5000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  | / | 17  | / | 2023        |

Transaction ID : AE9C790553CCC48A197B

Amount of Each Receipt this Period

3300.00

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

|          |
|----------|
| 31054.86 |
|----------|

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A.** BRUNER, JAMES, P., ,

Mailing Address 140 RIVIERA DUNES WAY UNIT 1501

City

PALMETTO

State

FL

Zip Code

34221-7114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNITED CONTRACTORS MIDWEST

Occupation

DIRECTOR

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  | / | 17  | / | 2023        |

Transaction ID : AB87E7044D5834F42B21

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B.** UFTRING, GARY, , ,

Mailing Address 603 HIGHVIEW RD

City

EAST PEORIA

State

IL

Zip Code

61611-1727

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UFTRING AUTO GROUP

Occupation

AUTO DEALER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 12  | / | 13  | / | 2022        |

Transaction ID : A8F3E3A3491F448C9A03

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C.** CURIA, RICHARD, , ,

Mailing Address 1100 N GALENA AVE

City

DIXON

State

IL

Zip Code

61021-1016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KEN NELSON AUTO GROUP

Occupation

DEALER PRINCIPAL

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  | / | 09  | / | 2023        |

Transaction ID : AACF03A8FB31C472298A

Amount of Each Receipt this Period

250.00

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

HELM, BRUCE, , ,

A.

Mailing Address 6770 PELICAN BAY BLVD

APT 243

City

NAPLES

State

FL

Zip Code

34108-8291

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A7BBC641010C44218A73

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

GREEN, PAMELA, , ,

B.

Mailing Address 5943 BARCLAY LN

City

NAPLES

State

FL

Zip Code

34110-7306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A9791C16EE80146AC969

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MATHERS, TOM, , ,

C.

Mailing Address 1694 PERSIMMON DR

City

NAPLES

State

FL

Zip Code

34109-0306

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A26F04C6F7A7E4772A12

Amount of Each Receipt this Period

1000.00

☒ Memo Item

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

0.00

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

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

PAGE 89 OF 163

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>FOTI, TONY, , ,</b>                                                                               |                                                |
| Mailing Address 616 106TH AVE N                                                                                                                 |                                                |
| City<br>NAPLES                                                                                                                                  | State<br>FL Zip Code<br>34108-1848             |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                                                |
| Name of Employer<br>BANEY ROOFING                                                                                                               | Occupation<br>DIRECTOR OF BUSINESS DEVELOPMENT |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>1000.00            |

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 09 / 2023          |

Transaction ID : A64AD06F120B44A898E7

Amount of Each Receipt this Period

1000.00

☒ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>MASTERSON, JOE, A., ,</b>                                                                         |                                     |
| Mailing Address 1285 GULF SHORE BLVD N<br>APT 8-B                                                                                               |                                     |
| City<br>NAPLES                                                                                                                                  | State<br>FL Zip Code<br>34102-4936  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                                     |
| Name of Employer<br>MASTERSON FOODS                                                                                                             | Occupation<br>BUSINESS OWNER        |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2900.00 |

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 17 / 2023          |

Transaction ID : AD3B8530C0A984976948

Amount of Each Receipt this Period

2900.00

☒ Memo Item

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>MASTERSON, NANCY, J, ,</b>                                                                        |                                     |
| Mailing Address 1285 GULF SHORE BLVD N<br>APT 8B                                                                                                |                                     |
| City<br>NAPLES                                                                                                                                  | State<br>FL Zip Code<br>34102-4936  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                                     |
| Name of Employer<br>MASTERSON FOODS                                                                                                             | Occupation<br>BUSINESS OWNER        |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>2900.00 |

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 17 / 2023          |

Transaction ID : AE8D1FD67F5A34690A75

Amount of Each Receipt this Period

2900.00

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

|      |
|------|
| 0.00 |
|------|

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

PAGE 90 OF 163

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DUBOIS, MARCEL, , ,**

Mailing Address 1384 BISHOP CREST COURT

|                    |             |                        |
|--------------------|-------------|------------------------|
| City<br>ALEXANDRIA | State<br>VA | Zip Code<br>22308-1807 |
|--------------------|-------------|------------------------|

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

|                         |                    |
|-------------------------|--------------------|
| Name of Employer<br>UPS | Occupation<br>EXEC |
|-------------------------|--------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 15 / 2023          |

Transaction ID : ACF17C6C2EBB848B5BFB

Amount of Each Receipt this Period

|        |
|--------|
| 250.00 |
|--------|

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HALVERSON, BRAD, , ,**

Mailing Address 3327 W ROSIE WAY

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>PEORIA | State<br>IL | Zip Code<br>61615-9761 |
|----------------|-------------|------------------------|

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

|                          |                       |
|--------------------------|-----------------------|
| Name of Employer<br>NONE | Occupation<br>RETIRED |
|--------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 11 / 15 / 2022          |

Transaction ID : AFB61111862E747B0AF7

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TINERVIN, JEFFREY, M., ,**

Mailing Address 1208 BUNN ST

|                     |             |                        |
|---------------------|-------------|------------------------|
| City<br>BLOOMINGTON | State<br>IL | Zip Code<br>61701-6917 |
|---------------------|-------------|------------------------|

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

|                          |                       |
|--------------------------|-----------------------|
| Name of Employer<br>NONE | Occupation<br>RETIRED |
|--------------------------|-----------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 13 / 2023          |

Transaction ID : A0184E0EE75504DFC8BD

Amount of Each Receipt this Period

|         |
|---------|
| 3300.00 |
|---------|

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

|      |
|------|
| 0.00 |
|------|

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

PAGE 91 OF 163

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**VIETS, ROBERT, O., ,**  
Mailing Address 313 NEAPOLITAN WAY

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>NAPLES | State<br>FL | Zip Code<br>34103-8557 |
|----------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIREDReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 17 / 2023          |

Transaction ID : A880994D18B89440B9DA

Amount of Each Receipt this Period

1000.00

☒ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**OWENS, JAMES, W, ,**  
Mailing Address 6897 GRENADIER BLVD

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>NAPLES | State<br>FL | Zip Code<br>34108-7220 |
|----------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIREDReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 17 / 2023          |

Transaction ID : AAC3E4BF3CA914C3A892

Amount of Each Receipt this Period

1000.00

☒ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**LAHOOD, STEPHEN, , ,**  
Mailing Address 230 OSPREY POINT DR

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>OSPREY | State<br>FL | Zip Code<br>34229-9249 |
|----------------|-------------|------------------------|

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIREDReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 17 / 2023          |

Transaction ID : A778519A4607B492ABDC

Amount of Each Receipt this Period

1000.00

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**WILLIAMS, NANCY, , ,**  
Mailing Address 7611 NORTH EDGEWILD DR.

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| PEORIA | IL    | 61614-2118 |

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
NONEOccupation  
RETIREDReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  | / | 17  | / | 2023        |

Transaction ID : A74EEB32CD28746DE82D

Amount of Each Receipt this Period

1000.00

☒ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**HOBBS, DAVID, W., ,**  
Mailing Address 1903 MALLINSON WAY

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| ALEXANDRIA | VA    | 22308-2760 |

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
THE HOBBS GROUPOccupation  
PRESIDENTReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 01  | / | 30  | / | 2023        |

Transaction ID : A0DECD3736F02480C80B

Amount of Each Receipt this Period

2900.00

☒ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**STEVENSON, DARLENE, , ,**  
Mailing Address 7092 VERDE WAY

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| NAPLES | FL    | 34108-6514 |

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
ALLIANT INSURANCE SERVICESOccupation  
RETIREDReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 02  | / | 13  | / | 2023        |

Transaction ID : A9FD862569FD445B5B7C

Amount of Each Receipt this Period

250.00

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

|      |
|------|
| 0.00 |
|------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ZAJICEK, JOHN, , ,**

Mailing Address 100 TANGLEWOOD DR

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>FREEPORT | State<br>IL | Zip Code<br>61032-6842 |
|------------------|-------------|------------------------|

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

|                                   |                                  |
|-----------------------------------|----------------------------------|
| Name of Employer<br>SELF EMPLOYED | Occupation<br>REAL ESTATE RENTAL |
|-----------------------------------|----------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 07 / 2023          |

Transaction ID : A847869D5BB8D42DEADD

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

☒ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**KIMBELL, JEFFREY, , ,**

Mailing Address 950 AERIE DRIVE

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>PARK CITY | State<br>UT | Zip Code<br>84060-8846 |
|-------------------|-------------|------------------------|

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

|                                   |                                      |
|-----------------------------------|--------------------------------------|
| Name of Employer<br>SELF EMPLOYED | Occupation<br>HEALTH CARE CONSULTANT |
|-----------------------------------|--------------------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 17 / 2023          |

Transaction ID : A8E24A38CEA024E4FAB8

Amount of Each Receipt this Period

|         |
|---------|
| 3300.00 |
|---------|

☒ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MCCLEERY, WILLIAM, M., , JR.**

Mailing Address 2641 WILD HORSE

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>QUINCY | State<br>IL | Zip Code<br>62305-0207 |
|----------------|-------------|------------------------|

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

|                                          |                        |
|------------------------------------------|------------------------|
| Name of Employer<br>SCHMIDSKAMP LAW FIRM | Occupation<br>ATTORNEY |
|------------------------------------------|------------------------|

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 14 / 2023          |

Transaction ID : AE7D638B49FF34322B60

Amount of Each Receipt this Period

|         |
|---------|
| 1000.00 |
|---------|

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

|      |
|------|
| 0.00 |
|------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>WASCOM, MICHAEL, , ,</b>                                                                          |                                    |
| Mailing Address 4908 RUSTIC OAKS CIR                                                                                                            |                                    |
| City<br>NAPLES                                                                                                                                  | State<br>FL                        |
| Zip Code<br>34105-4521                                                                                                                          |                                    |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                                    |
| Name of Employer<br>BANYAN WOODS GROUP LLC                                                                                                      | Occupation<br>PRESIDENT & CEO      |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>250.00 |

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  | / | 11  | / | 2023    |

Transaction ID : A1EDFFE7BF81C4C91AC3

Amount of Each Receipt this Period

250.00

☒ Memo Item

|                                                                                                                                                 |                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>TEAM LAHOOD</b>                                                                                   |                                       |
| Mailing Address 824 S MILLEDGE AVE STE 101                                                                                                      |                                       |
| City<br>ATHENS                                                                                                                                  | State<br>GA                           |
| Zip Code<br>30605                                                                                                                               |                                       |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00619486                                                                |                                       |
| Name of Employer                                                                                                                                | Occupation                            |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>135800.23 |

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  | / | 31  | / | 2023    |

Transaction ID : A69928CBDB38C40A3966

Amount of Each Receipt this Period

53077.80

☐ Memo Item

TRANSFER OF NET JFC FUNDS

|                                                                                                                                                 |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>HORIZON PHARMA USA INC POLITICAL ACTION COMMITTEE (HORIZON PHARMA PAC)</b>                        |                                     |
| Mailing Address 150 SAUNDERS RD                                                                                                                 |                                     |
| City<br>LAKE FOREST                                                                                                                             | State<br>IL                         |
| Zip Code<br>60045-2509                                                                                                                          |                                     |
| FEC ID number of contributing federal political committee.<br><b>C</b> C00624148                                                                |                                     |
| Name of Employer                                                                                                                                | Occupation                          |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼<br>5000.00 |

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  | / | 09  | / | 2023    |

Transaction ID : A115892E9BCB64163BC9

Amount of Each Receipt this Period

5000.00

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

|          |
|----------|
| 53077.80 |
|          |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                    |                                                            |                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------------------------------------------------|---------------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>KNAPHEIDE, ANN, W., ,</b>                                                               |                    |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br><b>02 / 28 / 2023</b> |  |
| Mailing Address <b>2912 CARNOUSTIE LN</b>                                                                                                       |                    |                                                            | <b>Transaction ID : AFCA5D4E849A747B7B0E</b>                        |  |
| City<br><b>QUINCY</b>                                                                                                                           | State<br><b>IL</b> | Zip Code<br><b>62301-6135</b>                              | Amount of Each Receipt this Period<br><b>3000.00</b>                |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                                     |  |
| Name of Employer<br><b>KNAPHEIDE MFG. CO.</b>                                                                                                   |                    | Occupation<br><b>ADMINISTRATIVE SUPPORT</b>                |                                                                     |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>3000.00</b>                 |                                                                     |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>OLSWANGER, SAM, , ,</b>                                                                 |                    |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br><b>03 / 04 / 2023</b> |  |
| Mailing Address <b>1712 16TH ST NW</b><br><b>APT 801</b>                                                                                        |                    |                                                            | <b>Transaction ID : A35135CA73D3F4B62B0F</b>                        |  |
| City<br><b>WASHINGTON</b>                                                                                                                       | State<br><b>DC</b> | Zip Code<br><b>20009-3126</b>                              | Amount of Each Receipt this Period<br><b>2900.00</b>                |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                                     |  |
| Name of Employer<br><b>AKIN GUMP STRAUSS HAUSER AND FELD</b>                                                                                    |                    | Occupation<br><b>SENIOR POLICY ADVISOR</b>                 |                                                                     |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>2900.00</b>                 |                                                                     |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>TODD, DAN, , ,</b>                                                                      |                    |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br><b>03 / 30 / 2023</b> |  |
| Mailing Address <b>3919 BENTON ST NW</b>                                                                                                        |                    |                                                            | <b>Transaction ID : ADFA5DABE54794627B5C</b>                        |  |
| City<br><b>WASHINGTON</b>                                                                                                                       | State<br><b>DC</b> | Zip Code<br><b>20007-1782</b>                              | Amount of Each Receipt this Period<br><b>2900.00</b>                |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                                     |  |
| Name of Employer<br><b>TODD STRATEGY GROUP</b>                                                                                                  |                    | Occupation<br><b>PRINCIPAL</b>                             |                                                                     |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>2900.00</b>                 |                                                                     |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |                    |                                                            | <b>0.00</b>                                                         |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |                    |                                                            |                                                                     |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                            |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>BEEMAN, RAY, , ,</b>                                                                    |             |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 20 / 2023 |  |
| Mailing Address 870 ALVERMAR RIDGE DR                                                                                                           |             |                                                            | Transaction ID : A2BE55866535741E1ABA                      |  |
| City<br>MC LEAN                                                                                                                                 | State<br>VA | Zip Code<br>22102-1435                                     | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                            |  |
| Name of Employer<br>WASHINGTON COUNCIL ERNST YOUNG                                                                                              |             | Occupation<br>PRINCIPAL                                    |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2900.00                        |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>BLACK, KATHLEEN, , ,</b>                                                                |             |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 24 / 2023 |  |
| Mailing Address 6528 75TH ST                                                                                                                    |             |                                                            | Transaction ID : AB6CF75DFE1E14ED8ACE                      |  |
| City<br>CABIN JOHN                                                                                                                              | State<br>MD | Zip Code<br>20818-1421                                     | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                            |  |
| Name of Employer<br>VISA                                                                                                                        |             | Occupation<br>GOV RELATIONS                                |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1500.00                        |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>BRANDT, KIMBERLY, L., ,</b>                                                             |             |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 27 / 2023 |  |
| Mailing Address 511 DEEP CREEK VW                                                                                                               |             |                                                            | Transaction ID : AB3D0071E3A214BDF98A                      |  |
| City<br>ANNAPOLIS                                                                                                                               | State<br>MD | Zip Code<br>21409-5480                                     | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                            |  |
| Name of Employer<br>TARPLIN DOWNS YOUNG LLC                                                                                                     |             | Occupation<br>ATTORNEY                                     |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1500.00                        |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                            | 0.00                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                            |                                                            |  |

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <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)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                            |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>LEVI, RICHARD, H, ,</b>                                                                 |             |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 28 / 2023 |  |
| Mailing Address 2401 W MONROE ST                                                                                                                |             |                                                            | Transaction ID : A15D3B90DECD94C94889                      |  |
| City<br>SPRINGFIELD                                                                                                                             | State<br>IL | Zip Code<br>62704-1439                                     | Amount of Each Receipt this Period<br>2900.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                            |  |
| Name of Employer<br>LEVI, RAY, & SHOOP, INC                                                                                                     |             | Occupation<br>EXECUTIVE                                    |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>2900.00                          |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>MORVIS, GEORGE, M., ,</b>                                                               |             |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 28 / 2023 |  |
| Mailing Address 4942 OAKLANE PATH                                                                                                               |             |                                                            | Transaction ID : A32B937268DF9491A986                      |  |
| City<br>STEVENSVILLE                                                                                                                            | State<br>MI | Zip Code<br>49127-9762                                     | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                            |  |
| Name of Employer<br>FINANCIAL SHARES 2                                                                                                          |             | Occupation<br>PRESIDENT AND CEO                            |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>1000.00                          |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>KANEY, JEFFREY, J, ,</b>                                                                |             |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 28 / 2023 |  |
| Mailing Address 1300 CAPITAL DR                                                                                                                 |             |                                                            | Transaction ID : A2E14CDF699BF4AD8AA4                      |  |
| City<br>ROCKFORD                                                                                                                                | State<br>IL | Zip Code<br>61109-3076                                     | Amount of Each Receipt this Period<br>250.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                            |  |
| Name of Employer<br>KANEY AEROSPACE                                                                                                             |             | Occupation<br>OWNER                                        |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>250.00                           |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                            | 0.00                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                            |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>LUND, THOMAS, , ,</b>                                                                             |             |                                     |
| Mailing Address 5150 TAMIAMI TRL E<br>STE 300                                                                                                   |             |                                     |
| City<br>NAPLES                                                                                                                                  | State<br>FL | Zip Code<br>34113-4166              |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |             |                                     |
| Name of Employer<br>LUND CAPITAL GROUP                                                                                                          |             | Occupation<br>OWNER                 |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>5800.00 |

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 28 / 2023          |

Transaction ID : AB6A43D0E5BA44517BBB

Amount of Each Receipt this Period

3300.00

☒ Memo Item

|                                                                                                                                                 |             |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>PAYNE, WARREN, , ,</b>                                                                            |             |                                     |
| Mailing Address 4120 SEMINARY RD                                                                                                                |             |                                     |
| City<br>ALEXANDRIA                                                                                                                              | State<br>VA | Zip Code<br>22304-1648              |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |             |                                     |
| Name of Employer<br>MAYER BROWN                                                                                                                 |             | Occupation<br>CONSULTANT            |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>2000.00 |

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : A1387486C896A43AE9A4

Amount of Each Receipt this Period

2000.00

☒ Memo Item

|                                                                                                                                                 |             |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>DUNGAN, DANIEL, , ,</b>                                                                           |             |                                     |
| Mailing Address 2 SUNSET LANE                                                                                                                   |             |                                     |
| City<br>SPRINGFIELD                                                                                                                             | State<br>IL | Zip Code<br>62704-3331              |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |             |                                     |
| Name of Employer<br>SPRINGFIELD ELECTRIC SUPPLY                                                                                                 |             | Occupation<br>EXECUTIVE CHAIRMAN    |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00 |

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 28 / 2023          |

Transaction ID : A73F17880982E48D8B12

Amount of Each Receipt this Period

1000.00

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

|      |
|------|
| 0.00 |
|------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**RUDISILL, ZACHARY, , ,**  
Mailing Address 2702 24TH ST NCity  
ARLINGTONState  
VAZip Code  
22207-4911FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AKIN GUMPOccupation  
ATTORNEYReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : A3E02A07FAEB447FA9A8

Amount of Each Receipt this Period

2900.00

☒ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**DION, STACEY, , ,**  
Mailing Address 238 12TH ST SECity  
WASHINGTONState  
DCZip Code  
20003-1428FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE CARLYLE GROUPOccupation  
MANAGING DIRECTORReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 30 2023

Transaction ID : A382FC6414B684882A7A

Amount of Each Receipt this Period

2900.00

☒ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**MURRY, EMILY, , ,**  
Mailing Address 1212 NEW YORK AVE NW  
STE 750City  
WASHINGTONState  
DCZip Code  
20005-6135FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TARPLIN, DOWNS YOUNGOccupation  
GOVERNMENT AFFAIRSReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 23 2023

Transaction ID : AED8F6F4BDFF14A08A81

Amount of Each Receipt this Period

1500.00

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

0.00

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

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| <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)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

YODER, AMOS, A., ,

A.

Mailing Address 4951 GULF SHORE BLVD N  
UNIT 202City  
NAPLESState  
FLZip Code  
34103-2693FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 28 2023

Transaction ID : ADF3E00887E354A9CAAD

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

ELDER, TIMOTHY, L., ,

B.

Mailing Address 4741 VIA DEL CORSO LN  
UNIT 202City  
BONITA SPRINGSState  
FLZip Code  
34134-5023FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 28 2023

Transaction ID : A731A29C55840456F97C

Amount of Each Receipt this Period

750.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

SPEARS, TRACY, J., ,

C.

Mailing Address 5191 N PROSPECT RD

City  
PEORIA HEIGHTSState  
ILZip Code  
61616-5376FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
HOMEMAKER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 28 2023

Transaction ID : A427563EA31054B40818

Amount of Each Receipt this Period

1000.00

☒ Memo Item

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**FITES, DONALD, , ,**  
Mailing Address 8843 BRASSIE BENDCity  
NAPLES  
State  
FL  
Zip Code  
34108FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIREDReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 09 2023

Transaction ID : A166BFB8BDAC34500B4C

Amount of Each Receipt this Period

2900.00

☒ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**PERKS, DOUGLAS, C., ,**  
Mailing Address 755 21ST AVE SCity  
NAPLES  
State  
FL  
Zip Code  
34102-7611FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIREDReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : A89401B91E5DF45D991A

Amount of Each Receipt this Period

1000.00

☒ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**LITTERST, NELSON, , ,**  
Mailing Address 1655 NORTH GREENBRIER STREETCity  
ARLINGTON  
State  
VA  
Zip Code  
22205-3627FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPITOL CHAMBERS STRATEGIESOccupation  
CONSULTINGReceipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 30 2023

Transaction ID : A062EBB6231CC41DEABC

Amount of Each Receipt this Period

2900.00

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                    |                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>BURKE, STONEY, , ,</b>                                                                            |                    |                                            |
| Mailing Address PO BOX 92311                                                                                                                    |                    |                                            |
| City<br><b>WASHINGTON</b>                                                                                                                       | State<br><b>DC</b> | Zip Code<br><b>20090-2311</b>              |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    |                                            |
| Name of Employer<br><b>AQUIA GROUP</b>                                                                                                          |                    | Occupation<br><b>PUBLIC POLICY</b>         |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>1500.00</b> |

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 03 / 31 / 2023          |

Transaction ID : ADD2845E460EA4FF6BB1

Amount of Each Receipt this Period

|         |
|---------|
| 1500.00 |
|---------|

☒ Memo Item

|                                                                                                                                                 |                    |                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>MAYO, CYNTHIA, A., ,</b>                                                                          |                    |                                            |
| Mailing Address 610 MUREX DR                                                                                                                    |                    |                                            |
| City<br><b>NAPLES</b>                                                                                                                           | State<br><b>FL</b> | Zip Code<br><b>34102-5144</b>              |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    |                                            |
| Name of Employer<br><b>MAYO CONSULTING GROUP</b>                                                                                                |                    | Occupation<br><b>VP</b>                    |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>1501.14</b> |

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 16 / 2023          |

Transaction ID : AFDB6FFE5438C4FAEBEC

Amount of Each Receipt this Period

|         |
|---------|
| 1501.14 |
|---------|

☒ Memo Item

FOOD &amp; BEVERAGE

|                                                                                                                                                 |                    |                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|--------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>MAYO, ROBERT, , ,</b>                                                                             |                    |                                            |
| Mailing Address 610 MUREX DR                                                                                                                    |                    |                                            |
| City<br><b>NAPLES</b>                                                                                                                           | State<br><b>FL</b> | Zip Code<br><b>34102-5144</b>              |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    |                                            |
| Name of Employer<br><b>MAYO CONSULTING GROUP</b>                                                                                                |                    | Occupation<br><b>PRESIDENT/CEO</b>         |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>1501.14</b> |

Date of Receipt

|                         |
|-------------------------|
| M M / D D / Y Y Y Y Y Y |
| 02 / 16 / 2023          |

Transaction ID : AE687A55D4CC54099AB0

Amount of Each Receipt this Period

|         |
|---------|
| 1501.14 |
|---------|

☒ Memo Item

FOOD &amp; BEVERAGE

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

|      |
|------|
| 0.00 |
|------|

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |             |                                                            |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>ALETY, SAAT, , ,</b>                                                                    |             |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>03 / 06 / 2023 |  |
| Mailing Address 1345 K ST SE<br>UNIT 106                                                                                                        |             |                                                            | Transaction ID : AFDDC687725FE4CBF802                      |  |
| City<br>WASHINGTON                                                                                                                              | State<br>DC | Zip Code<br>20003-4543                                     | Amount of Each Receipt this Period<br>1500.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                            |  |
| Name of Employer<br>FEDERAL HALL POLICY ADVISORS                                                                                                |             | Occupation<br>PARTNER                                      |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1500.00                        |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>SCHACHTRUP, F. MICHAEL, , ,</b>                                                         |             |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 28 / 2023 |  |
| Mailing Address 105 FAIRHAVEN LN                                                                                                                |             |                                                            | Transaction ID : A558A1F3E83BD4D86A35                      |  |
| City<br>PEORIA HEIGHTS                                                                                                                          | State<br>IL | Zip Code<br>61616-6611                                     | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                            |  |
| Name of Employer<br>SELF EMPLOYED                                                                                                               |             | Occupation<br>FARMER                                       |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>500.00                         |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>BOOSE, JERRY, , ,</b>                                                                   |             |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>02 / 28 / 2023 |  |
| Mailing Address 4N730 HIGH MEADOW RD                                                                                                            |             |                                                            | Transaction ID : AEE0476D8819F4642921                      |  |
| City<br>SAINT CHARLES                                                                                                                           | State<br>IL | Zip Code<br>60175-8575                                     | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                            |  |
| Name of Employer<br>SELF EMPLOYED                                                                                                               |             | Occupation<br>ATTORNEY                                     |                                                            |  |
| Receipt For: 2024<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>500.00                         |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                                            | 0.00                                                       |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |             |                                                            |                                                            |  |

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS****A.** Full Name (Last, First, Middle Initial)  
**JANSSEN, JOAN, , ,**

Mailing Address 1441 CAXAMBAS CT

City  
MARCO ISLANDState  
FLZip Code  
34145-6603FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 28 2023

Transaction ID : A59FE5D72E45F42C5AF1

Amount of Each Receipt this Period

250.00

☒ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**MOAWAD, GERARD, M, ,**

Mailing Address 4806 U ST NW

City  
WASHINGTONState  
DCZip Code  
20007-1546FEC ID number of contributing  
federal political committee.

C

Name of Employer  
M MEDICAL GROUPOccupation  
PRESIDENT AND FOUNDER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 28 2023

Transaction ID : AAF9D88431C7E4D35AE0

Amount of Each Receipt this Period

2900.00

☒ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**TEAM LAHOOD**

Mailing Address 824 S MILLEDGE AVE STE 101

City  
ATHENSState  
GAZip Code  
30605FEC ID number of contributing  
federal political committee.

C C00619486

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

135800.23

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2023

Transaction ID : A1E27F917F4CE4D79A59

Amount of Each Receipt this Period

2437.00

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

2437.00

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

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

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NAME OF COMMITTEE (In Full)  
**LAHOOD FOR CONGRESS**

|                                                                                                                                                 |                    |                                                            |                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------------------------------------------------|---------------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>LUND, THOMAS, , ,</b>                                                                   |                    |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y Y<br><b>02 / 28 / 2023</b> |  |
| Mailing Address <b>5150 TAMIAMI TRL E</b><br><b>STE 300</b>                                                                                     |                    |                                                            | <b>Transaction ID : A242B43E2D2FC4392835</b>                        |  |
| City<br><b>NAPLES</b>                                                                                                                           | State<br><b>FL</b> | Zip Code<br><b>34113-4166</b>                              | Amount of Each Receipt this Period<br><b>2500.00</b>                |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    | Memo Item<br><input checked="" type="checkbox"/> Memo Item |                                                                     |  |
| Name of Employer<br><b>LUND CAPITAL GROUP</b>                                                                                                   |                    | Occupation<br><b>OWNER</b>                                 |                                                                     |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |                    | Election Cycle-to-Date ▼<br><b>5800.00</b>                 |                                                                     |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)                                                                                               |                    |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y Y                          |  |
| Mailing Address                                                                                                                                 |                    |                                                            |                                                                     |  |
| City                                                                                                                                            | State              | Zip Code                                                   | Amount of Each Receipt this Period                                  |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    | Memo Item<br><input type="checkbox"/> Memo Item            |                                                                     |  |
| Name of Employer                                                                                                                                |                    | Occupation                                                 |                                                                     |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |                    | Election Cycle-to-Date ▼                                   |                                                                     |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)                                                                                               |                    |                                                            | Date of Receipt<br>M M / D D / Y Y Y Y Y Y                          |  |
| Mailing Address                                                                                                                                 |                    |                                                            |                                                                     |  |
| City                                                                                                                                            | State              | Zip Code                                                   | Amount of Each Receipt this Period                                  |  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                                          |                    | Memo Item<br><input type="checkbox"/> Memo Item            |                                                                     |  |
| Name of Employer                                                                                                                                |                    | Occupation                                                 |                                                                     |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |                    | Election Cycle-to-Date ▼                                   |                                                                     |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |                    |                                                            | <b>0.00</b>                                                         |  |
| <b>TOTAL</b> This Period (last page this line number only)..... ▶                                                                               |                    |                                                            | <b>90540.15</b>                                                     |  |

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMEREN ILLINOIS**Mailing Address 300 LIBERTY  
P.O. BOX 88034City  
CHICAGOState  
ILZip Code  
60680-1034Purpose of Disbursement  
CAMPAIGN OFFICE ELECTRIC

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 18  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

668.70

Transaction ID : B232F9476D8344A6A8F1

☐ Memo Item**B. AMERICAN EXPRESS**

Mailing Address 200 VESEY ST

City  
NEW YORKState  
NYZip Code  
10285-1000Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1510.81

Transaction ID : B98D522721E184AE0898

☐ Memo Item**C. MARRIOTT HOTELS**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDAState  
MDZip Code  
20817-1102Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

353.92

Transaction ID : B4A5244AA2D864B288C8

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

2179.51

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

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

PAGE 107 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THRIFTY CAR RENTAL**

Mailing Address PO BOX 35250

City  
TULSAState  
OKZip Code  
74153-0250Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

301.48

Transaction ID : B2C85553F9E23425D8F5

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARRIOTT HOTELS**

Mailing Address 10400 FERNWOOD RD

City  
BETHESDAState  
MDZip Code  
20817-1102Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

353.92

Transaction ID : B33FA3B33F0C04D91BC7

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. ARENA LLC**Mailing Address 1260 E STRINGHAM AVE  
STE 350City  
SALT LAKE CITYState  
UTZip Code  
84106-2963Purpose of Disbursement  
DIRECT MAIL SERVICES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

3762.25

Transaction ID : BDE98A23190DF441C88E

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

3762.25

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

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

PAGE 108 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address PO BOX 716045

City  
PHILADELPHIAState  
PAZip Code  
19171-6045Purpose of Disbursement  
DATABASE SOFTWARE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1905.00

Transaction ID : BC798276BCA3E403FB44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address PO BOX 716045

City  
PHILADELPHIAState  
PAZip Code  
19171-6045Purpose of Disbursement  
DATABASE SOFTWARE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 22  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1905.00

Transaction ID : BC6BD76E4DDA74FDCBE9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BETTER BANKS**

Mailing Address 10225 N KNOXVILLE AVE

City  
PEORIAState  
ILZip Code  
61615-1355Purpose of Disbursement  
CAMPAIGN VEHICLE PAYMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 17  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

749.17

Transaction ID : BA66DF795783B4B2D9AE

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

4559.17

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

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

PAGE 109 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BETTER BANKS**

Mailing Address 10225 N KNOXVILLE AVE

City  
PEORIAState  
ILZip Code  
61615-1355Purpose of Disbursement  
CAMPAIGN VEHICLE PAYMENT

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

749.17

Transaction ID : BA7449D67C4F24BB6942

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BETTER BANKS**

Mailing Address 10225 N KNOXVILLE AVE

City  
PEORIAState  
ILZip Code  
61615-1355Purpose of Disbursement  
CAMPAIGN VEHICLE PAYMENT

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

749.17

Transaction ID : BB281B8AFF21E4953BE3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BOONE COUNTY GOP**

Mailing Address 12258 SQUIRREL TREE LN

City  
BELVIDEREState  
ILZip Code  
61008-8579Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

BOONE COUNTY GOP

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

460.00

Transaction ID : B937D52133C4A44BF8D5

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

1958.34

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

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

PAGE 110 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BOONE COUNTY GOP**

Mailing Address 12258 SQUIRREL TREE LN

City  
BELVIDEREState  
ILZip Code  
61008-8579Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

BOONE COUNTY GOP

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BCD6EA16FD9AD4BB9BEE

☐ Memo Item**B. CARROLL COUNTY REPUBLICAN CENTRAL COMMITTEE**

Mailing Address 21647 THOMSON RD

City  
CHADWICKState  
ILZip Code  
61014-9210Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

CARROLL COUNTY REPUBLICAN CENTRAL COMMITTEE

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B0C5A6F3BAAA44B6BA2E

☐ Memo Item**C. CHASE CARD SERVICES**

Mailing Address 270 PARK AVE

City  
NEW YORKState  
NYZip Code  
10017Purpose of Disbursement  
SEE MEMO

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1584.68

Transaction ID : B2719C5F32EB24609AB8

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

3084.68

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

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

PAGE 111 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address PO BOX 36647-1CR

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1099.96

Transaction ID : BB9EBC7947C514C5EBA6

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOLIDAY INN HOTELS**

Mailing Address 4821 OAK ST

City  
QUINCYState  
ILZip Code  
62305-9138Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

434.64

Transaction ID : BA55E5920ACB74A508AB

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. NATIONAL CAR RENTAL**

Mailing Address 10124 NATURAL BRIDGE RD

City  
SAINT LOUISState  
MOZip Code  
63134-3301Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

50.08

Transaction ID : B91B2377C25534FB6BC5

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

0.00

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

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

PAGE 112 OF 163

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CLARK HILL PLC**

Mailing Address 130 E RANDOLPH ST STE 3900

City  
CHICAGOState  
ILZip Code  
60601-6317Purpose of Disbursement  
LEGAL SERVICES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 18  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

10377.74

Transaction ID : B30A9CDCA907644C4B21

☐ Memo Item**B. COMCAST**

Mailing Address 11701 JFK BLVD

City  
PHILADELPHIAState  
PAZip Code  
19103Purpose of Disbursement  
CAMPAIGN OFFICE INTERNET

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

207.73

Transaction ID : BD521BE58FA3C4ED59AC

☐ Memo Item**C. COMCAST**

Mailing Address 11701 JFK BLVD

City  
PHILADELPHIAState  
PAZip Code  
19103Purpose of Disbursement  
CAMPAIGN OFFICE INTERNET

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 06  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

227.29

Transaction ID : BDF94FEE5C4A743E0AB4

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

10812.76

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

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. COMCAST**

Mailing Address 11701 JFK BLVD

City  
PHILADELPHIAState  
PAZip Code  
19103Purpose of Disbursement  
CAMPAIGN OFFICE INTERNET

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 06  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

227.30

Transaction ID : B94D386CE1FD44E818B7

☐ Memo Item**B. COYLE, KATHERINE, , ,**

Mailing Address 10511 N SUNRISE CT

City  
PEORIAState  
ILZip Code  
61615-8831Purpose of Disbursement  
FIELD CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B8CE5F64554484988935

☐ Memo Item**C. FORD, JAKE, , ,**

Mailing Address 3109 15TH STREET

City  
MOLINEState  
ILZip Code  
61265-6005Purpose of Disbursement  
STRATEGY CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : BF76B3CF8BA1747C1991

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

14227.30

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

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

PAGE 114 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF COLLEEN REDPATH FEGER**

Mailing Address 3005 LAXFORD DR

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 23  |   | 2023    |

City  
SPRINGFIELDState  
ILZip Code  
62712-5886

FEC Identification Number

C

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

FRIENDS OF COLLEEN REDPATH FEGER

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : BCB679222AA584AFA9F9

☐ 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. GORDON, STOCKMAN & WAUGH, PC**

Mailing Address 8726 N INDUSTRIAL RD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 06  |   | 2023    |

City  
PEORIAState  
ILZip Code  
61615-1506

FEC Identification Number

C

Purpose of Disbursement  
TAX PREPARATION FEE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

600.00

Transaction ID : BB72557CC53264EDEA81

☐ 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. GRUNDY COUNTY FARM BUREAU FOUNDATION**

Mailing Address 4000 N DIVISION ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 13  |   | 2023    |

City  
MORRISState  
ILZip Code  
60450-9357

FEC Identification Number

C

Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : B81E933C523904DCCBE3

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

1100.00

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

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

PAGE 115 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GRUNDY COUNTY REPUBLICAN CENTRAL COMMITTEE**Mailing Address C/O THE NEWBERG GROUP  
954 W RT 6City  
MORRISState  
ILZip Code  
60450Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name  
GRUNDY COUNTY REPUBLICAN CENTRAL COMMITTEECategory/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 08  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B50E4C590405D4061BB8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HENRY COUNTY REPUBLICANS**

Mailing Address 204 S STATE ST

City  
WYOMINGState  
ILZip Code  
61491Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name  
HENRY COUNTY REPUBLICANSCategory/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 08  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BEC9AA2388CDD445695F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. IMGE**Mailing Address 108 S WASHINGTON ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3029Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

6032.29

Transaction ID : BD148583F48F4468C912

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

7032.29

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

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

PAGE 116 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. IMGE**Mailing Address 108 S WASHINGTON ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3029Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 23  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

28.00

Transaction ID : B7881601E5718402081B

☐ Memo Item**B. IMGE**Mailing Address 108 S WASHINGTON ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3029Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 30  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 7.50

Transaction ID : BC91B44C3D1F44357986

☐ Memo Item**C. IMGE**Mailing Address 108 S WASHINGTON ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3029Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 13  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

8.00

Transaction ID : B950D8A8A45BA4EF2B41

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

28.50

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

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

PAGE 117 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. IMGE**

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02  | 27  | 2023    |

Mailing Address 108 S WASHINGTON ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3029Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

4930.34

Transaction ID : B11CE7D1D639E4CE6BE9

☐ Memo Item**B. IMGE**

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02  | 27  | 2023    |

Mailing Address 108 S WASHINGTON ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3029Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2.10

Transaction ID : B6E63D88ABDFD454293B

☐ Memo Item**C. IMGE**

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 22  | 2023    |

Mailing Address 108 S WASHINGTON ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3029Purpose of Disbursement  
DIGITAL CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

6792.02

Transaction ID : BB6BF7BFF09464767B96

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

11724.46

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

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

PAGE 118 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. IMGE**Mailing Address 108 S WASHINGTON ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3029Purpose of Disbursement  
DIGITAL MARKETING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

28.50

Transaction ID : B80B38DC412D94D1A970

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. IMGE**Mailing Address 108 S WASHINGTON ST  
FL 2City  
ALEXANDRIAState  
VAZip Code  
22314-3029Purpose of Disbursement  
VOID OF PREVIOUS-CHECK NOT CASHED

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 5681.82

Transaction ID : B4DCAB92BE6A346DD9B8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JO DAVIESS COUNTY REPUBLICAN CENTRAL COMMITTEE**

Mailing Address 6A82 SHENANDOAH LN

City  
APPLE RIVERState  
ILZip Code  
61001-9726Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

JO DAVIESS COUNTY REPUBLICAN CENTRAL COMMITTEE

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B3D1B0F522C6A452ABBC

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

- 5253.32

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

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

PAGE 119 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. LAW OFFICE OF JOHN FOGARTY, JR.**Mailing Address 4043 N RAVENSWOOD AVE  
STE 226City  
CHICAGOState  
ILZip Code  
60613-5682Purpose of Disbursement  
LEGAL FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2934.00

Transaction ID : BDA963C02418C4DA1A1D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LEE COUNTY REPUBLICAN CENTRAL COMMITTEE**

Mailing Address PO BOX 223

City  
DIXONState  
ILZip Code  
61021-0223Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

LEE COUNTY REPUBLICAN CENTRAL COMMITTEE

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 18  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BBD82EFC9313D4A93B90

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCLEAN COUNTY CHAMBER OF COMMERCE**

Mailing Address PO BOX 1586

City  
BLOOMINGTONState  
ILZip Code  
61702-1586Purpose of Disbursement  
MEMBERSHIP DUES

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 30  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

330.00

Transaction ID : B07685487063B40FCBB1

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

4264.00

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

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

PAGE 120 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MEMBER LUNCH FUND**Mailing Address 15 INDEPENDENCE AVE SE  
1139 LONGWORTH HOBCity  
WASHINGTONState  
DCZip Code  
20515-6005Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 08  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B6CD21B6DEAC64C97BEC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PEORIA AREA WORLD AFFAIRS COUNCIL, INC.**

Mailing Address 15001 W BRADLEY AVE

City  
PEORIAState  
ILZip Code  
61625-0001Purpose of Disbursement  
EVENT SPONSORSHIP

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B233FB54BFF0F4B53ABA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PEORIA JOURNAL STAR**

Mailing Address PO BOX 5201

City  
PEORIAState  
ILZip Code  
61601-5201Purpose of Disbursement  
NEWSPAPER SUBSCRIPTION

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 08  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

449.35

Transaction ID : B423B8C565E4748B7867

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

4449.35

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

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

PAGE 121 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PEORIA NOTRE DAME HIGH SCHOOL**

Mailing Address 5105 N SHERIDAN RD

City  
PEORIAState  
ILZip Code  
61614-4855Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1550.00

Transaction ID : BD532835F027949CCBF4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PIP PRINTING AND MARKETING**

Mailing Address 8325 N ALLEN RD

City  
PEORIAState  
ILZip Code  
61615-2076Purpose of Disbursement  
PRINTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1754.64

Transaction ID : B87D17A43AE4645F9BFE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PNC BANK**

Mailing Address PO BOX 609

City  
PITTSBURGHState  
PAZip Code  
15230-0609Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

22886.37

Transaction ID : B618B329DE0FC4D08877

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

26191.01

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

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

PAGE 122 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. INTERCONTINENTAL HOTELS**

Mailing Address 100 CHOPIN PLZ

City  
MIAMIState  
FLZip Code  
33131-4342Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1205.35

Transaction ID : B4D2F3BBA7A684994B7D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. LOTTE NEW YORK PALACE**

Mailing Address 455 MADISON AVE

City  
NEW YORKState  
NYZip Code  
10022-6845Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1080.15

Transaction ID : BB200E90514E74902977

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVE NE

City  
WASHINGTONState  
DCZip Code  
20002-4285Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1044.00

Transaction ID : BD2127DA55A6B42BF97D

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

0.00

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

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

PAGE 123 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SPARKS STEAK HOUSE**

Mailing Address 210 E 46TH ST

City  
NEW YORKState  
NYZip Code  
10017-2915Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

364.52

Transaction ID : BACAD574E59634C9E95A

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. ILILI**

Mailing Address 100 DISTRICT SQ SW

City  
WASHINGTONState  
DCZip Code  
20024-2807Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

302.33

Transaction ID : B29B3BBE4A5C948CFB64

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. OCEAN PRIME**

Mailing Address 123 W 52ND ST

City  
NEW YORKState  
NYZip Code  
10019-6003Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

211.90

Transaction ID : B7EE132D3B7934A0087C

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

0.00

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

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

PAGE 124 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. KELLEHERS IRISH PUB**

Mailing Address 619 SW WATER ST

City  
PEORIAState  
ILZip Code  
61602-5114Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

77.17

Transaction ID : B5AA3F0DAB52D43BC874

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. COSTCO**

Mailing Address 1901 W 22ND ST

City  
OAK BROOKState  
ILZip Code  
60523-1759Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

165.56

Transaction ID : B62F946B2F79F49ADB57

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BROADWAY.COM**Mailing Address 729 7TH AVE  
FL 6City  
NEW YORKState  
NYZip Code  
10019-6946Purpose of Disbursement  
ENTERTAINMENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1378.36

Transaction ID : BD54448E6F8364E13BFB

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

0.00

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

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

PAGE 125 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FT WORTHState  
TXZip Code  
76155-2605Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1077.20

Transaction ID : B9AF8916208114D19AB9

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. VERIZON**

Mailing Address 2401 W PIONEER PKWY

City  
PEORIAState  
ILZip Code  
61615-1877Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

223.68

Transaction ID : B5F368B44C43A43FA975

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CIRCLE K**

Mailing Address 2427 W NORTHLAND AVE

City  
PEORIAState  
ILZip Code  
61614-4568Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

131.43

Transaction ID : BD967D930948145EBB87

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

0.00

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

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

PAGE 126 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER**Mailing Address 1455 MARKET ST  
FL 4City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

767.44

Transaction ID : B69664CF31F2C4405A03

☒ Memo Item**B. LA MASSERIA**

Mailing Address 235 W 48TH ST

City  
NEW YORKState  
NYZip Code  
10036-1404Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

249.78

Transaction ID : B2891099B7A504035850

☒ Memo Item**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

192.38

Transaction ID : BA6C8FBCE37AA4347A76

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

0.00

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

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

PAGE 127 OF 163

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PNC BANK**

Mailing Address PO BOX 609

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

City  
PITTSBURGHState  
PAZip Code  
15230-0609

FEC Identification Number

C

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1.43

Transaction ID : BEAAE27513A8041CAB8F

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. COSTCO**

Mailing Address 1901 W 22ND ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

City  
OAK BROOKState  
ILZip Code  
60523-1759

FEC Identification Number

C

Purpose of Disbursement  
GAS

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

42.06

Transaction ID : B7D923D44E9F94053BB1

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. WHITE HOUSE HISTORICAL ASSOCIATION**

Mailing Address 1610 H ST NW

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

City  
WASHINGTONState  
DCZip Code  
20006-4907

FEC Identification Number

C

Purpose of Disbursement  
DONOR GIFTS (ORNAMENTS)

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2156.88

Transaction ID : B18781ED2D3EF44EDBC6

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

0.00

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

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

PAGE 128 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 6310 N UNIVERSITY ST

City  
PEORIAState  
ILZip Code  
61614-8905Purpose of Disbursement  
SHIPPING/POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8763.60

Transaction ID : B62BE075C00704AB0AFB

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. OFFICE DEPOT/OFFICE MAX**

Mailing Address 801 W LAKE AVE

City  
PEORIAState  
ILZip Code  
61614-5951Purpose of Disbursement  
OFFICE EQUIPMENT AND SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

980.18

Transaction ID : BE17A50431B1D400CBD9

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 55 GLENLAKE PKWY

City  
ATLANTAState  
GAZip Code  
30328-3474Purpose of Disbursement  
SHIPPING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

306.05

Transaction ID : BE0967FD76B6D415EB46

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

0.00

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

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

PAGE 129 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WALGREENS**

Mailing Address 342 E ILLINOIS ST

City  
CHICAGOState  
ILZip Code  
60611-4304Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

49.02

Transaction ID : B6AAAAA233BF8450BB3B

☒ Memo Item**B. PNC BANK**

Mailing Address PO BOX 609

City  
PITTSBURGHState  
PAZip Code  
15230-0609Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

12903.02

Transaction ID : B26DE54241DE645589A9

☐ Memo Item**C. CIRCLE K**

Mailing Address 2427 W NORTHLAND AVE

City  
PEORIAState  
ILZip Code  
61614-4568Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

497.18

Transaction ID : BEA0380AA98264291AC9

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

12903.02

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

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

PAGE 130 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ILILI**

Mailing Address 100 DISTRICT SQ SW

City  
WASHINGTONState  
DCZip Code  
20024-2807Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

372.24

Transaction ID : B3305CA4B7755404C81C

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE GRILL**

Mailing Address 99 MARKET SQ SW

City  
WASHINGTONState  
DCZip Code  
20024-3441Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

236.28

Transaction ID : BE9AA8DD5CCCA4244AE5

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 55 GLENLAKE PKWY

City  
ATLANTAState  
GAZip Code  
30328-3474Purpose of Disbursement  
SHIPPING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

105.52

Transaction ID : B073600235F6B475DB83

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

0.00

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

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

PAGE 131 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CONNECTED INC**

Mailing Address 3219 NE ADAMS ST

City  
PEORIAState  
ILZip Code  
61603-2307Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1619.24

Transaction ID : B2928FA229ABB43B6873

☒ Memo Item**B. UNITED AIRLINES**

Mailing Address 223 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1085.69

Transaction ID : B9D566198C2304069BE2

☒ Memo Item**C. MANGOLD FORD**

Mailing Address 1100 W CENTER ST

City  
EUREKAState  
ILZip Code  
61530-9507Purpose of Disbursement  
CAMPAIGN VEHICLE MAINTENANCE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1416.15

Transaction ID : BD411AFF6099D468E9BA

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

0.00

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

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

PAGE 132 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER EATS**

Mailing Address 1455 MARKET ST

City  
SAN FRANCISCOState  
CAZip Code  
94103-1331Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

63.59

Transaction ID : B8A58588630884138A76

☒ Memo Item**B. COSTCO**

Mailing Address 1901 W 22ND ST

City  
OAK BROOKState  
ILZip Code  
60523-1759Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

127.43

Transaction ID : B1374A286DC8541E186C

☒ Memo Item**C. INTERCONTINENTAL HOTELS**

Mailing Address 100 CHOPIN PLZ

City  
MIAMIState  
FLZip Code  
33131-4342Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1034.16

Transaction ID : BD79148A6D3E8441EB39

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

0.00

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

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

PAGE 133 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. VERIZON**

Mailing Address 2401 W PIONEER PKWY

City  
PEORIAState  
ILZip Code  
61615-1877Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

352.71

Transaction ID : B082CCE6BF0464055858

☒ Memo Item**B. UBER**Mailing Address 1455 MARKET ST  
FL 4City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

472.02

Transaction ID : B42C56B57C56044C6B88

☒ Memo Item**C. USPS**

Mailing Address 6310 N UNIVERSITY ST

City  
PEORIAState  
ILZip Code  
61614-8905Purpose of Disbursement  
SHIPPING/POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

14.40

Transaction ID : BA390F1B993DC424B98D

☒ Memo Item

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

0.00

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

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

PAGE 134 OF 163

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WEGMANS**

Mailing Address 1500 BROOKS AVE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

City  
ROCHESTERState  
NYZip Code  
14624-3512Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

412.19

Transaction ID : B1286159FE14B4241A1D

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE GWEN**

Mailing Address 521 N RUSH ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

City  
CHICAGOState  
ILZip Code  
60611-3646Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

917.55

Transaction ID : BB5A8BC04E5BE49338DD

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PANERA BREAD**

Mailing Address 1101 W BIRD BLVD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

City  
PEORIAState  
ILZip Code  
61615-1401Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

162.75

Transaction ID : BFB066C776BF9459A81F

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

0.00

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

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

PAGE 135 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
CATERING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1178.60

Transaction ID : BD1857BBFB31D493886B

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. PARLOR PIZZA BAR**

Mailing Address 108 N GREEN ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

City  
CHICAGOState  
ILZip Code  
60607-2304Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

259.03

Transaction ID : BB5BEBBCE45B74F4AB6B

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE PUBLIK HOUSE**

Mailing Address 4614 N PROSPECT RD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

City  
PEORIA HEIGHTSState  
ILZip Code  
61616-6438Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

356.00

Transaction ID : BAFF4ACB54E5146BEB9B

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

0.00

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

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

PAGE 136 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CHARLIE PALMER STEAK**

Mailing Address 101 CONSTITUTION AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-2133Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

230.30

Transaction ID : BD91B9C4BFE0742C682F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. STARBUCKS**

Mailing Address 3412 FREEDOM DR

City  
SPRINGFIELDState  
ILZip Code  
62704-6516Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

202.00

Transaction ID : BEA72E1E5E0524977BC2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PNC BANK**

Mailing Address PO BOX 609

City  
PITTSBURGHState  
PAZip Code  
15230-0609Purpose of Disbursement  
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

15988.78

Transaction ID : B07156B7674D840DC951

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

15988.78

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

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

PAGE 137 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. OFFICE DEPOT/OFFICE MAX**

Mailing Address 801 W LAKE AVE

City  
PEORIAState  
ILZip Code  
61614-5951Purpose of Disbursement  
OFFICE EQUIPMENT AND SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1503.56

Transaction ID : B1F4FD852BB2B4AD1891

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**Mailing Address 1455 MARKET ST  
FL 4City  
SAN FRANCISCOState  
CAZip Code  
94103-1355Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

528.45

Transaction ID : BCCD05FE41DB545C0B29

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. OBERLANDER ALARM SYSTEMS, INC.**

Mailing Address 2216 W ALTORFER DR

City  
PEORIAState  
ILZip Code  
61615-1846Purpose of Disbursement  
RESIDENTIAL SECURITY EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

144.90

Transaction ID : B0AAECF2B5A0442F5A96

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

0.00

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

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

PAGE 138 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PANERA BREAD**

Mailing Address 1101 W BIRD BLVD

City  
PEORIAState  
ILZip Code  
61615-1401Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

39.80

Transaction ID : B15711C5288144CACB5E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. VERIZON**

Mailing Address 2401 W PIONEER PKWY

City  
PEORIAState  
ILZip Code  
61615-1877Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

191.39

Transaction ID : B8656F73125B14D2986C

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. UPS**

Mailing Address 55 GLENLAKE PKWY

City  
ATLANTAState  
GAZip Code  
30328-3474Purpose of Disbursement  
SHIPPING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

122.22

Transaction ID : BC136EAB6FFB54250A46

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

0.00

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

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

PAGE 139 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FEDEX**

Mailing Address 3465 N UNIVERSITY ST.

City  
PEORIAState  
ILZip Code  
61604Purpose of Disbursement  
PRINTING/SHIPPING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

351.12

Transaction ID : B730A83BA1BFB48C2A82

☒ Memo Item**B. SUBWAY**

Mailing Address 325 SUB WAY

City  
MILFORDState  
CTZip Code  
06461-3081Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

628.32

Transaction ID : B2F9A302AC2964891B31

☒ Memo Item**C. CHIPPERS GRILL**

Mailing Address 1733 N BLOOMINGTON ST

City  
STREATORState  
ILZip Code  
61364-1315Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

385.20

Transaction ID : B0F5EDAE4BFE14895B35

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

0.00

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

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CHARLIE PALMER STEAK**

Mailing Address 101 CONSTITUTION AVE NW

City  
WASHINGTONState  
DCZip Code  
20001-2133Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

168.60

Transaction ID : B2FD89A743D394E24946

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. COSTCO**

Mailing Address 1901 W 22ND ST

City  
OAK BROOKState  
ILZip Code  
60523-1759Purpose of Disbursement  
EVENT SUPPLIES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

177.93

Transaction ID : BA4A94A72A478482A9FE

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. CENTROLINA**

Mailing Address 974 PALMER ALY NW

City  
WASHINGTONState  
DCZip Code  
20001-4508Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

207.80

Transaction ID : B6A35B3E5632741E3AE0

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

0.00

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

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

PAGE 141 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BEMOBILE**Mailing Address 2100 S COLUMBIA RD  
STE 214City  
GRAND FORKSState  
NDZip Code  
58201-5895Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

211.23

Transaction ID : B695B04B497E245028DD

☒ Memo Item**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

562.50

Transaction ID : BAC5350A229D44484B82

☒ Memo Item**C. GREAT HARVEST BREAD**Mailing Address 9010 N ALLEN RD  
STE GCity  
PEORIAState  
ILZip Code  
61615-1575Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

85.20

Transaction ID : B612CFB849C604EA285D

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

0.00

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

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

PAGE 142 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES**

Mailing Address 223 S WACKER DR

City  
CHICAGOState  
ILZip Code  
60606Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

4032.85

Transaction ID : BB294EDB68A5846A0A0D

☒ Memo Item**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City  
FT WORTHState  
TXZip Code  
76155-2605Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2883.20

Transaction ID : B1E58597747F9406EB59

☒ Memo Item**C. STARBUCKS**

Mailing Address 3412 FREEDOM DR

City  
SPRINGFIELDState  
ILZip Code  
62704-6516Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : BA5EED3CD322F4DFBDB

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

0.00

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

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

PAGE 143 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PRAIRIE STREET BREWING**

Mailing Address 200 PRAIRIE ST

City  
ROCKFORDState  
ILZip Code  
61107-3987Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

827.77

Transaction ID : B53C712EAB1054DD18C0

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CIRCLE K**

Mailing Address 2427 W NORTHLAND AVE

City  
PEORIAState  
ILZip Code  
61614-4568Purpose of Disbursement  
TRAVEL EXPENSE

002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

346.21

Transaction ID : BAD3E96FC5EE8442DB10

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. PRAIRIE LAKES CROSSING LLC**

Mailing Address 5231 N PROSPECT RD

City  
PEORIAState  
ILZip Code  
61614-5258Purpose of Disbursement  
CAMPAIGN OFFICE RENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2295.00

Transaction ID : BC53BEFD96B7F4447B89

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

2295.00

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

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

PAGE 144 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PRAIRIE LAKES CROSSING LLC**

Mailing Address 5231 N PROSPECT RD

City  
PEORIAState  
ILZip Code  
61614-5258Purpose of Disbursement  
CAMPAIGN OFFICE RENT

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2295.00

Transaction ID : B9AC169104E0A4A319E4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PRAIRIE LAKES CROSSING LLC**

Mailing Address 5231 N PROSPECT RD

City  
PEORIAState  
ILZip Code  
61614-5258Purpose of Disbursement  
CAMPAIGN OFFICE RENT

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2295.00

Transaction ID : B36304850ED684BE6A79

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES, INC.**Mailing Address 824 S MILLEDGE AVE  
STE 101City  
ATHENSState  
GAZip Code  
30605-1332Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2447.95

Transaction ID : B3516BB9678B54BECB52

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

7037.95

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

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

PAGE 145 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES, INC.**Mailing Address 824 S MILLEDGE AVE  
STE 101City  
ATHENSState  
GAZip Code  
30605-1332Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 01  | 18  | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2398.16

Transaction ID : BBD9DCA96F12B4396A83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PROFESSIONAL DATA SERVICES, INC.**Mailing Address 824 S MILLEDGE AVE  
STE 101City  
ATHENSState  
GAZip Code  
30605-1332Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02  | 15  | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

2061.53

Transaction ID : B3A364BC435334D8BA3B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PROSPECT FLORIST**

Mailing Address 3319 N PROSPECT RD

City  
PEORIAState  
ILZip Code  
61603-1549Purpose of Disbursement  
FLOWERS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 01  | 09  | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

422.58

Transaction ID : B4B64EB12058547E797C

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

4882.27

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

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

PAGE 146 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PROSPECT FLORIST**

Mailing Address 3319 N PROSPECT RD

City  
PEORIAState  
ILZip Code  
61603-1549Purpose of Disbursement  
FLOWERS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 06  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

131.35

Transaction ID : B372869380EEA400AB7B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PROSPECT FLORIST**

Mailing Address 3319 N PROSPECT RD

City  
PEORIAState  
ILZip Code  
61603-1549Purpose of Disbursement  
FLOWERS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 27  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

224.10

Transaction ID : BD71C82B805A54F6EBB1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ST. SHARBEL CHURCH**

Mailing Address 2914 W SCENIC DR

City  
PEORIAState  
ILZip Code  
61615-3830Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 06  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B9D30769C33214DADA40

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

605.45

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

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

PAGE 147 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. STARK COUNTY REPUBLICAN CENTRAL COMM**

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 08  |   | 2023    |

Mailing Address PO BOX 80

City  
WYOMINGState  
ILZip Code  
61491-0080Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

STARK COUNTY REPUBLICAN CENTRAL COMM

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BA4E144F773E04C59B14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STATE FARM**

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

Mailing Address PO BOX 680001

City  
DALLASState  
TXZip Code  
75368-0001Purpose of Disbursement  
CAMPAIGN VEHICLE INSURANCE

002

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:

FEC Identification Number

C

Amount of Each Disbursement this Period

180.26

Transaction ID : B3764BBDF00374F45A18

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STATE FARM**

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 06  |   | 2023    |

Mailing Address PO BOX 680001

City  
DALLASState  
TXZip Code  
75368-0001Purpose of Disbursement  
CAMPAIGN VEHICLE INSURANCE

002

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:

FEC Identification Number

C

Amount of Each Disbursement this Period

180.26

Transaction ID : B72ADF97ABDBB4F1DB7B

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

860.52

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 148 OF 163

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. STATE FARM**

Mailing Address PO BOX 680001

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
DALLASState  
TXZip Code  
75368-0001Purpose of Disbursement  
CAMPAIGN VEHICLE INSURANCE

002

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

180.26

Transaction ID : B2CB00B2580134FE59DD

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. THE LINCOLN SERIES**

Mailing Address 354 COPPER SPRINGS LN

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 14  |   | 2023    |

City  
ELGINState  
ILZip Code  
60124-4374Purpose of Disbursement  
SPONSORSHIP

001

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

500.00

Transaction ID : BCEB1D56C76D7418E900

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. THE NEWBERG GROUP**

Mailing Address 954 W US RTE 6

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

City  
MORRISState  
ILZip Code  
60450-8858Purpose of Disbursement  
FUNDRAISING CONSULTING

001

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

2000.00

Transaction ID : B0E54A7909FD042BFAD3

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

2680.26

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

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

PAGE 149 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE NEWBERG GROUP**

Mailing Address 954 W US RTE 6

City  
MORRISState  
ILZip Code  
60450-8858Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B5B6724FC6FFF4F8CBF2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE VOYAGEUR COMPANY, LLC**

Mailing Address 1151 ORCHARD CIR

City  
SAINT PAULState  
MNZip Code  
55118-4146Purpose of Disbursement  
DIRECT MAIL/POSTAGE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

15926.73

Transaction ID : B164503C0A2B243D6AC8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891Purpose of Disbursement  
CC TRANSACTION FEES

001

Candidate Name

WINRED

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

6.39

Transaction ID : B6C1DCD9C59AF4809A45

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

19933.12

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 150 OF 163

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 16  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891Purpose of Disbursement  
CC TRANSACTION FEES

001

FEC Identification Number

C C00694323

Candidate Name  
**WINRED**Category/  
Type

Amount of Each Disbursement this Period

123.25

Transaction ID : BA60E516B2382468C8DD

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 23  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891Purpose of Disbursement  
CC TRANSACTION FEES

001

FEC Identification Number

C C00694323

Candidate Name  
**WINRED**Category/  
Type

Amount of Each Disbursement this Period

36.89

Transaction ID : B3F647E6C3996404BB11

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 30  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891Purpose of Disbursement  
CC TRANSACTION FEES

001

FEC Identification Number

C C00694323

Candidate Name  
**WINRED**Category/  
Type

Amount of Each Disbursement this Period

16.64

Transaction ID : B345F7EC2CEA34D4E87C

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

176.78

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

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

PAGE 151 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 06  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C C00694323

Purpose of Disbursement  
CC TRANSACTION FEES

001

Amount of Each Disbursement this Period

253.95

Candidate Name  
WINREDCategory/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID : BA2761BB6AF7D4232A49

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 13  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C C00694323

Purpose of Disbursement  
CC TRANSACTION FEES

001

Amount of Each Disbursement this Period

103.74

Candidate Name  
WINREDCategory/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID : BC924672CD23E4DB0896

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 20  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C C00694323

Purpose of Disbursement  
CC TRANSACTION FEES

001

Amount of Each Disbursement this Period

12.09

Candidate Name  
WINREDCategory/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID : B60A9E91ABA004650997

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

369.78

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

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

PAGE 152 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 27  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

|   |           |
|---|-----------|
| C | C00694323 |
|---|-----------|

Purpose of Disbursement  
CC TRANSACTION FEES

001

Category/  
Type

Amount of Each Disbursement this Period

|       |
|-------|
| 22.61 |
|-------|

Transaction ID : BE60338AE5E7C42438E8

☐ Memo ItemCandidate Name  
WINRED

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. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 06  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

|   |           |
|---|-----------|
| C | C00694323 |
|---|-----------|

Purpose of Disbursement  
TRANSACTION FEES

001

Category/  
Type

Amount of Each Disbursement this Period

|       |
|-------|
| 41.56 |
|-------|

Transaction ID : B2C4A8E17CE7D4F00AA4

☐ Memo ItemCandidate Name  
WINRED

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. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 13  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

|   |           |
|---|-----------|
| C | C00694323 |
|---|-----------|

Purpose of Disbursement  
TRANSACTION FEES

001

Category/  
Type

Amount of Each Disbursement this Period

|        |
|--------|
| 363.64 |
|--------|

Transaction ID : BAC024BB0AAC64329A67

☐ Memo ItemCandidate Name  
WINRED

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).....▶

427.81

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

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

PAGE 153 OF 163

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 20  | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891Purpose of Disbursement  
TRANSACTION FEES

001

FEC Identification Number

C C00694323

Candidate Name  
**WINRED**Category/  
Type

Amount of Each Disbursement this Period

152.20

Transaction ID : B8A9D4315C6B84CDD82C

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 29  | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891Purpose of Disbursement  
TRANSACTION FEES

001

FEC Identification Number

C C00694323

Candidate Name  
**WINRED**Category/  
Type

Amount of Each Disbursement this Period

63.66

Transaction ID : BB8A0DA10E13F4D05B3D

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 31  | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891Purpose of Disbursement  
CC TRANSACTION FEES

001

FEC Identification Number

C C00694323

Candidate Name  
**WINRED**Category/  
Type

Amount of Each Disbursement this Period

716.98

Transaction ID : B72237290705E4EAE9BA

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

932.84

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

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

PAGE 154 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 31  |   | 2023    |

City  
ARLINGTONState  
VAZip Code  
22219-1891

FEC Identification Number

C C00694323

Purpose of Disbursement  
CC TRANSACTION FEES

001

Amount of Each Disbursement this Period

221.17

Transaction ID : BB1EE17328C0B456B95B

☐ Memo ItemCandidate Name  
WINREDCategory/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. WOLFF, LUKE, , ,**Mailing Address 5250 N KNOXVILLE AVE  
APT 702

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 04  |   | 2023    |

City  
PEORIAState  
ILZip Code  
61614-5046

FEC Identification Number

C

Purpose of Disbursement  
FIELD CONSULTING

001

Amount of Each Disbursement this Period

1565.00

Transaction ID : BD00F4016DDC640CCB35

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. WOLFF, LUKE, , ,**Mailing Address 5250 N KNOXVILLE AVE  
APT 702

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 01  |   | 2023    |

City  
PEORIAState  
ILZip Code  
61614-5046

FEC Identification Number

C

Purpose of Disbursement  
FIELD CONSULTING

001

Amount of Each Disbursement this Period

1565.00

Transaction ID : BC1AAA2FD5C6845F5AE3

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

3351.17

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

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

PAGE 155 OF 163

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WOLFF, LUKE, , ,**Mailing Address 5250 N KNOXVILLE AVE  
APT 702City  
PEORIAState  
ILZip Code  
61614-5046Purpose of Disbursement  
FIELD CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

1565.00

Transaction ID : BCCFA0BB679A343C9A52

☐ Memo Item**B. WOODFORD COUNTY REPUBLICAN CENTRAL COMMITTEE**

Mailing Address 106 S MAIN ST

City  
EUREKAState  
ILZip Code  
61530-1161Purpose of Disbursement  
SPONSORSHIP

001

Candidate Name

WOODFORD COUNTY REPUBLICAN CENTRAL COMMITTEE

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 08  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

610.00

Transaction ID : BB5C1E73C97D44638AD7

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

2175.00

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

164740.05

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

PAGE 156 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CARUANA FOR SHERIFF**

Mailing Address PO BOX 7582

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

City  
ROCKFORDState  
ILZip Code  
61126-7582

FEC Identification Number

C

Purpose of Disbursement  
CONTRIBUTION TO LOCAL/STATE COMMITTEE

011

Candidate Name

CARUANA FOR SHERIFF

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : BCC5B25726238453A8FA

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. CITIZENS FOR ZACH OYLER**

Mailing Address PO BOX 10456

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

City  
PEORIAState  
ILZip Code  
61612-0456

FEC Identification Number

C

Purpose of Disbursement  
CONTRIBUTION TO LOCAL/STATE COMMITTEE

011

Candidate Name

CITIZENS FOR ZACH OYLER

Category/  
Type

Amount of Each Disbursement this Period

750.00

Transaction ID : B1B69F9CB301A48D3BFD

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. COMMUNITY FOUNDATION OF CENTRAL ILLINOIS**

Mailing Address 3625 N SHERIDAN RD

Date of Disbursement

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

City  
PEORIAState  
ILZip Code  
61604-1434

FEC Identification Number

C

Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : B6B64ED7F910140C0B9E

☐ Memo Item

State:

District:

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

1250.00

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

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

PAGE 157 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. COMMUNITY WORKSHOP & TRAINING CENTER**

Mailing Address 3215 N UNIVERSITY ST

Date of Disbursement

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

City  
PEORIAState  
ILZip Code  
61604-1318

FEC Identification Number

C

Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : B9511A21E4F8E4BB5B20

☐ 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. DREAM CENTER PEORIA**

Mailing Address 714 HAMILTON BLVD

Date of Disbursement

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

City  
PEORIAState  
ILZip Code  
61603-3617

FEC Identification Number

C

Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : B65B906C2E18448C6915

☐ 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. FRIENDS FOR KIRAN VELPULA**

Mailing Address 10905 N HIGHCREST LN

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 2 |   | 2 | 0 | 2 | 3 |

City  
DUNLAPState  
ILZip Code  
61525-8700

FEC Identification Number

C

Purpose of Disbursement  
CONTRIBUTION TO LOCAL/STATE COMMITTEE

011

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

750.00

Transaction ID : B4557E12B9A4B4C889F1

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

1250.00

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

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

PAGE 158 OF 163

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF ERIKA REYNOLDS**

Mailing Address 408 MAGNOLIA ST

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 08  |   | 2023    |

City  
BLOOMINGTONState  
ILZip Code  
61701

FEC Identification Number

C

Purpose of Disbursement  
CONTRIBUTION TO STATE/LOCAL COMMITTEE

011

Candidate Name

FRIENDS OF ERIKA REYNOLDS

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : B7FD8DF385D7B4522B28

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF KATHLEEN LORENZ**

Mailing Address PO BOX 54

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 13  |   | 2023    |

City  
NORMALState  
ILZip Code  
61761-0054

FEC Identification Number

C

Purpose of Disbursement  
CONTRIBUTION TO LOCAL/STATE COMMITTEE

011

Candidate Name

FRIENDS OF KATHLEEN LORENZ

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : BE1377A45586C4DEC953

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. KELLY FOR COUNCIL**

Mailing Address 445 W WOODRIDGE LN

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 13  |   | 2023    |

City  
PEORIAState  
ILZip Code  
61614-2957

FEC Identification Number

C

Purpose of Disbursement  
CONTRIBUTION(STATE/LOCAL COMMITTEE)

011

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B12B186BC787B4108B7D

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

1250.00

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

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

PAGE 159 OF 163

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LORAS COLLEGE**

Mailing Address 1450 ALTA VISTA ST

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 06  | 2023    |

City  
DUBUQUEState  
IAZip Code  
52001-4327

FEC Identification Number

C

Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B9D02C6FFFAD14C5BBE0

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. MIDWEST FOOD BANKS**

Mailing Address 700 ERIE AVE

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 06  | 2023    |

City  
MORTONState  
ILZip Code  
61550-9694

FEC Identification Number

C

Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : BB3F8DD2477B945FB9C3

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. OPEN GOAL PROJECT**

Mailing Address 1300 VAN BUREN ST NW

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 01  | 04  | 2023    |

City  
WASHINGTONState  
DCZip Code  
20012-2930

FEC Identification Number

C

Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

525.00

Transaction ID : B45FFDF686FD54D62AA1

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

1275.00

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

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

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. OSF HEALTHCARE**

Mailing Address 124 SW ADAMS ST

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02  | 01  | 2023    |

City  
PEORIAState  
ILZip Code  
61602-1308Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B69C64359B3DA48B2883

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OSF SAINT FRANCIS FOUNDATION**

Mailing Address 530 NE GLEN OAK AVE

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 01  | 04  | 2023    |

City  
PEORIAState  
ILZip Code  
61637-0001Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B8F89BFFE2AA44B409C8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RON DESANTIS FOR GOVERNOR**Mailing Address 301 W PLATT ST  
# 345

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 30  | 2023    |

City  
TAMPAState  
FLZip Code  
33606-2292Purpose of Disbursement  
VOID OF PREVIOUS-CHECK NOT CASHED

011

Candidate Name

**RON DESANTIS FOR GOVERNOR**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

- 3000.00

Transaction ID : B8D36C39050DE4595850

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

- 2250.00

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

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SAGA INNOVATIONS**

Mailing Address 10 LAUDHOLM RD

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 01  | 04  | 2023    |

City  
NEWTONState  
MAZip Code  
02458-1934Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

260.37

Transaction ID : B58EAB5A696094ED2AE6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SKILLS FOR LIFE BASKETBALL ACADEMY**Mailing Address 5901 N PROSPECT RD  
STE 200

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 01  | 04  | 2023    |

City  
PEORIAState  
ILZip Code  
61614-4337Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B412E52EFCBBD476BBB1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SPRINGDALE HISTORIC PRESERVATION FOUNDATION**

Mailing Address PO BOX 5511

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 06  | 2023    |

City  
PEORIAState  
ILZip Code  
61601-5511Purpose of Disbursement  
DONATION

012

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : BBB84B194F8B14FAA978

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

1010.37

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

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

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

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NAME OF COMMITTEE (In Full)

**LAHOOD FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ST. MARK'S SCHOOL**

Mailing Address 711 N UNDERHILL ST

City  
PEORIAState  
ILZip Code  
61606-2404Purpose of Disbursement  
DONATION

012

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 06  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BE4944C0D57854755B73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE RONALD W REAGAN SOCIETY**Mailing Address 300 E COLLEGE AVE  
C/O EUREKA COLLEGECity  
EUREKAState  
ILZip Code  
61530-1562Purpose of Disbursement  
DONATION

012

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 06  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B099D0589433244D0959

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THERESA TRACY STRIVE TO SURVIVE**

Mailing Address 317 N UNIVERSITY ST

City  
PEORIAState  
ILZip Code  
61604Purpose of Disbursement  
VOID OF PREVIOUS-CHECK NOT CASHED

012

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 30  |   | 2023    |

FEC Identification Number

C

Amount of Each Disbursement this Period

- 250.00

Transaction ID : B51D132AFE5A64FEB840

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

500.00

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

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

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

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NAME OF COMMITTEE (In Full)

LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UNIVERSITY OF ILLINOIS FOUNDATION**

Mailing Address 1305 W GREEN ST

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 06  | 2023    |

City  
URBANAState  
ILZip Code  
61801-2900

FEC Identification Number

C

Purpose of Disbursement  
DONATION

012

Candidate Name

Amount of Each Disbursement this Period

500.00

Transaction ID : B0884B0AFAA0E45EBBA4

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. WOMEN'S CARE CENTER**

Mailing Address 7319 N UNIVERSITY ST

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 06  | 2023    |

City  
PEORIAState  
ILZip Code  
61614-1210

FEC Identification Number

C

Purpose of Disbursement  
DONATION

012

Candidate Name

Amount of Each Disbursement this Period

250.00

Transaction ID : B502D08AB23E74658AA0

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

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

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Candidate Name

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

750.00

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

5035.37