

**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

JOE KAUFMAN FOR CONGRESS

ADDRESS (number and street)

2645 EXECUTIVE PARK DRIVE STE 512



Check if different than previously reported. (ACC)

WESTON

FL

33331

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00501205

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

FL

20

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2025

through

M M / D D / Y Y Y Y

09 / 30 / 2025

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

Type or Print Name of Treasurer KAUFMAN, JOE, , ,

Signature of Treasurer

KAUFMAN, JOE, , ,

Date

M M / D D / Y Y Y Y

10 / 13 / 2025

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

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**JOE KAUFMAN FOR CONGRESS**

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2025

To:

MM / DD / YYYY  
09 / 30 / 2025

|                                                                                                                  | 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))....                                              | 132737.54               | 300465.39                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 132737.54               | 300465.39                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 0.00                    | 1777.85                            |
| (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)) .....                                      | 0.00                    | 1777.85                            |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....                                              | 361476.55               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 50291.89                |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 89862.53                |                                    |

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

JOE KAUFMAN FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2025

To:

MM / DD / YYYY  
09 / 30 / 2025**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

51386.00

140852.00

(ii) Unitemized .....

81351.54

159613.39

(iii) TOTAL of contributions  
from individuals ▶

132737.54

300465.39

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

(d) The Candidate .....

0.00

0.00

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

132737.54

300465.39

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

0.00

0.00

## 13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

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)..... ▶

132737.54

300465.39

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

| II. DISBURSEMENTS                                                            | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....                                              | 0.00                          | 1777.85                            |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 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                          | 0.00                               |
| (b) Political Party Committees.....                                          | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs) .....                       | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 0.00                               |
| 21. OTHER DISBURSEMENTS .....                                                | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 0.00                          | 1777.85                            |

## **III. CASH SUMMARY**

|                                                                                       |           |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 228739.01 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 132737.54 |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 361476.55 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 0.00      |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 361476.55 |

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

PAGE 5 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ABBOTT, ROGER, S, MR,

A.

Mailing Address 270 N HIGH POINT BLVD APT D

City

BOYNTON BEACH

State

FL

Zip Code

33435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.69845

Amount of Each Receipt this Period

100.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

ABBOTT, ROGER, S, MR,

Mailing Address 270 N HIGH POINT BLVD APT D

City

BOYNTON BEACH

State

FL

Zip Code

33435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.68579

Amount of Each Receipt this Period

100.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

ABBOTT, ROGER, S, MR,

Mailing Address 270 N HIGH POINT BLVD APT D

City

BOYNTON BEACH

State

FL

Zip Code

33435

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 3 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.71426

Amount of Each Receipt this Period

100.00



Memo Item

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

300.00

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

PAGE 6 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Abramowitz, Ken, , ,

**A.** Mailing Address 4530 HAZLETON LN

City

Lake Worth

State

FL

Zip Code

33449

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : SA11AI.72288

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ALEWINE, HELEN, B, MS,

**B.** Mailing Address 159 BRADBERRY CT

City

COMMERCE

State

GA

Zip Code

30529

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 12 2025

Transaction ID : SA11AI.72004

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**C.** Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

206.00

Date of Receipt

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

Transaction ID : SA11AI.69528

Amount of Each Receipt this Period

12.00

☐ Memo Item

612.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**A.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

207.00

Date of Receipt

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

Transaction ID : SA11AI.69531

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**B.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 15 2025

Transaction ID : SA11AI.69530

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**C.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

214.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 21 2025

Transaction ID : SA11AI.69529

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

8.00

**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 8 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**A.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

219.00

Date of Receipt

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

Transaction ID : SA11AI.69525

Amount of Each Receipt this Period

5.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 7 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.69532

Amount of Each Receipt this Period

1.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

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

Transaction ID : SA11AI.69533

Amount of Each Receipt this Period

10.00

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

16.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**A.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

236.00

Date of Receipt

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

Transaction ID : SA11AI.72215

Amount of Each Receipt this Period

6.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**B.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

241.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 03 2025

Transaction ID : SA11AI.72212

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**C.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 08 2025

Transaction ID : SA11AI.72216

Amount of Each Receipt this Period

21.00

☐ Memo Item

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

32.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**A.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 16 2025

Transaction ID : SA11AI.72217

Amount of Each Receipt this Period

4.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**B.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 24 2025

Transaction ID : SA11AI.72214

Amount of Each Receipt this Period

4.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANONYMOUS, JKR, , ,

**C.**

Mailing Address

City

State

Zip Code

99999

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 29 2025

Transaction ID : SA11AI.72213

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

9.00

**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 11 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ARKO, ELIZABETH, M, MISS,

**A.** Mailing Address 272 CABRILLO ST APT A

City

COSTA MESA

State

CA

Zip Code

92627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2025

01

2025

Transaction ID : SA11AI.70221

Amount of Each Receipt this Period

250.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
ARKO, ELIZABETH, M, MISS,  
Mailing Address 272 CABRILLO ST APT A

City

COSTA MESA

State

CA

Zip Code

92627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2025

30

2025

Transaction ID : SA11AI.70220

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
ARKO, ELIZABETH, M, MISS,  
Mailing Address 272 CABRILLO ST APT A

City

COSTA MESA

State

CA

Zip Code

92627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 22 / 2025

22

2025

Transaction ID : SA11AI.68896

Amount of Each Receipt this Period

100.00

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

450.00

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

PAGE 12 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BALLEW, JERRY, T, ,

**A.**

Mailing Address 52010 READ LOOP

City

LA PINE

State

OR

Zip Code

97739

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.68882

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BARBOUR, IDA, M, ,

**B.**

Mailing Address 48 KESWICK DR

City

MECHANICSBURG

State

PA

Zip Code

17050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.68985

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BEDLAN, BETTY, JEAN, MRS,

**C.**

Mailing Address 828 22ND ST APT 108

City

FAIRBURY

State

NE

Zip Code

68352

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11AI.69662

Amount of Each Receipt this Period

100.00

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

700.00

**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 13 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BEDLAN, BETTY, JEAN, MRS,

**A.** Mailing Address 828 22ND ST APT 108City  
FAIRBURYState  
NEZip Code  
68352FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : SA11AI.69661

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BERNARDO, ASHLEY, , MS,

**B.** Mailing Address 8 BRIDLE CTCity  
OYSTER BAYState  
NYZip Code  
11771FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 01 2025

Transaction ID : SA11AI.70604

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BERNAU, PHYLLIS, , MRS,

**C.** Mailing Address 1169 W SLEEPY HOLLOW DRCity  
NIXAState  
MOZip Code  
65714FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11AI.69809

Amount of Each Receipt this Period

50.00

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

650.00

**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 14 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BERNAU, PHYLLIS, , MRS,

**A.**

Mailing Address 1169 W SLEEPY HOLLOW DR

City

NIXA

State

MO

Zip Code

65714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 08 2025

Transaction ID : SA11AI.71397

Amount of Each Receipt this Period

50.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

BERNAU, PHYLLIS, , MRS,

Mailing Address 1169 W SLEEPY HOLLOW DR

City

NIXA

State

MO

Zip Code

65714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 23 2025

Transaction ID : SA11AI.71396

Amount of Each Receipt this Period

50.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, , ,

Mailing Address PO BOX 207

City

CHINA

State

TX

Zip Code

77613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID : SA11AI.70621

Amount of Each Receipt this Period

350.00

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

450.00

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

PAGE 15 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, , ,

**A.**

Mailing Address PO BOX 207

City

CHINA

State

TX

Zip Code

77613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 1 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.69154

Amount of Each Receipt this Period

350.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, , ,

Mailing Address PO BOX 207

City

CHINA

State

TX

Zip Code

77613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID : SA11AI.71902

Amount of Each Receipt this Period

350.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

BLANTON, LUKE, , ,

Mailing Address 5654 SANTA ANITA DR

City

TALLAHASSEE

State

FL

Zip Code

32309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

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

Transaction ID : SA11AI.71556

Amount of Each Receipt this Period

25.00

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

725.00

**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 16 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BRISTOL, LLOYD, , ,

**A.**

Mailing Address 12147 SE 172ND LN

City

SUMMERFIELD

State

FL

Zip Code

34491

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.72198

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRITTON, BEATRICE, W, MRS,

**B.**

Mailing Address PO BOX 2327

City

SOUTH HAMILTON

State

MA

Zip Code

01982

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.68684

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BROWN, MOLLIE, , ,

**C.**

Mailing Address PO BOX 124

City

LITTLE MOUNTAIN

State

SC

Zip Code

29075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

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

Transaction ID : SA11AI.71129

Amount of Each Receipt this Period

50.00

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

250.00

**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 17 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BROWN, MOLLIE, , ,

**A.**

Mailing Address PO BOX 124

City

LITTLE MOUNTAIN

State

SC

Zip Code

29075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

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

Transaction ID : SA11AI.71130

Amount of Each Receipt this Period

50.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

BROWN, MOLLIE, , ,

Mailing Address PO BOX 124

City

LITTLE MOUNTAIN

State

SC

Zip Code

29075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

355.00

Date of Receipt

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

Transaction ID : SA11AI.72202

Amount of Each Receipt this Period

60.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

BUCHANAN, GRACE, , ,

Mailing Address 5619 CASTLEBURY CT

City

BURKE

State

VA

Zip Code

22015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

490.00

Date of Receipt

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

Transaction ID : SA11AI.72189

Amount of Each Receipt this Period

300.00

☐ Memo Item

410.00

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

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

PAGE 18 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BULLARD, THOI, T, MRS,

**A.**

Mailing Address 1276 BOCA GRANDE AVE

City

JACKSONVILLE

State

FL

Zip Code

32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 18 2025

Transaction ID : SA11AI.70917

Amount of Each Receipt this Period

35.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

BULLARD, THOI, T, MRS,

Mailing Address 1276 BOCA GRANDE AVE

City

JACKSONVILLE

State

FL

Zip Code

32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 21 2025

Transaction ID : SA11AI.70915

Amount of Each Receipt this Period

50.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

BULLARD, THOI, T, MRS,

Mailing Address 1276 BOCA GRANDE AVE

City

JACKSONVILLE

State

FL

Zip Code

32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 25 2025

Transaction ID : SA11AI.70918

Amount of Each Receipt this Period

35.00

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

120.00

**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 19 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BULLARD, THOI, T, MRS,

**A.**

Mailing Address 1276 BOCA GRANDE AVE

City

JACKSONVILLE

State

FL

Zip Code

32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.70916

Amount of Each Receipt this Period

35.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

BULLARD, THOI, T, MRS,

Mailing Address 1276 BOCA GRANDE AVE

City

JACKSONVILLE

State

FL

Zip Code

32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

445.00

Date of Receipt

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

Transaction ID : SA11AI.69353

Amount of Each Receipt this Period

35.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

BULLARD, THOI, T, MRS,

Mailing Address 1276 BOCA GRANDE AVE

City

JACKSONVILLE

State

FL

Zip Code

32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

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

Transaction ID : SA11AI.72081

Amount of Each Receipt this Period

35.00

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

105.00

**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 20 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BULLARD, THOI, T, MRS,

**A.**

Mailing Address 1276 BOCA GRANDE AVE

City

JACKSONVILLE

State

FL

Zip Code

32233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

515.00

Date of Receipt

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

Transaction ID : SA11AI.72080

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BUSCHE, TAI, HUA, MR,

**B.**

Mailing Address 405 WOODTON KNL

City

STOCKBRIDGE

State

GA

Zip Code

30281

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : SA11AI.69070

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BUSSEY, ANN, H, MRS,

**C.**

Mailing Address 5322 INDIGO ST

City

HOUSTON

State

TX

Zip Code

77096

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RETIRED CPA/I T EXEC

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71412

Amount of Each Receipt this Period

250.00

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

485.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BUTLER, MARIE, , MS,

**A.**

Mailing Address 5927 FOXDALE LOOP S

City

SOUTHAVEN

State

MS

Zip Code

38672

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 21 2025

Transaction ID : SA11AI.70583

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BUTLER, MARIE, , MS,

**B.**

Mailing Address 5927 FOXDALE LOOP S

City

SOUTHAVEN

State

MS

Zip Code

38672

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

335.00

Date of Receipt

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

Transaction ID : SA11AI.69120

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BUTLER, MARIE, , MS,

**C.**

Mailing Address 5927 FOXDALE LOOP S

City

SOUTHAVEN

State

MS

Zip Code

38672

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 26 2025

Transaction ID : SA11AI.69121

Amount of Each Receipt this Period

55.00

☐ Memo Item

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

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

160.00

**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 22 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BUTLER, MARIE, , MS,

**A.** Mailing Address 5927 FOXDALE LOOP S

City

SOUTHAVEN

State

MS

Zip Code

38672

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

440.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 0 | 3 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71887

Amount of Each Receipt this Period

50.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
BUTLER, MARIE, , MS,  
Mailing Address 5927 FOXDALE LOOP S

City

SOUTHAVEN

State

MS

Zip Code

38672

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

510.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 1 | 5 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71886

Amount of Each Receipt this Period

70.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
BUTLER, MARIE, , MS,  
Mailing Address 5927 FOXDALE LOOP S

City

SOUTHAVEN

State

MS

Zip Code

38672

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

560.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 2 | 5 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.72296

Amount of Each Receipt this Period

50.00

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

170.00

**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 23 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CARO, JOSE, C, MR,

**A.**

Mailing Address 52 PROVIDENCE RD

City

MORTON

State

PA

Zip Code

19070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 7 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.69182

Amount of Each Receipt this Period

35.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

CARO, JOSE, C, MR,

Mailing Address 52 PROVIDENCE RD

City

MORTON

State

PA

Zip Code

19070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

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

Transaction ID : SA11AI.69183

Amount of Each Receipt this Period

50.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

CARO, JOSE, C, MR,

Mailing Address 52 PROVIDENCE RD

City

MORTON

State

PA

Zip Code

19070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

335.00

Date of Receipt

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

Transaction ID : SA11AI.71927

Amount of Each Receipt this Period

75.00



Memo Item

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

160.00

**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 24 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CARO, JOSE, C, MR,

**A.**

Mailing Address 52 PROVIDENCE RD

City

MORTON

State

PA

Zip Code

19070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

405.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71926

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHRISTIAN, SUSAN, , MS,

**B.**

Mailing Address 2828 ASH MILL RD

City

DOYLESTOWN

State

PA

Zip Code

18902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 3 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71952

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CLAIBORNE, WALTER, H, MR, III

**C.**

Mailing Address 14217 CLAIBORNE RD

City

BATCHELOR

State

LA

Zip Code

70715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : SA11AI.71500

Amount of Each Receipt this Period

200.00

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

370.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CLARK, THOMAS, L, MR,

**A.**

Mailing Address 2735 S WAGNER RD UNIT 83

City

ANN ARBOR

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : SA11AI.70464

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CLARK, THOMAS, L, MR,

**B.**

Mailing Address 2735 S WAGNER RD UNIT 83

City

ANN ARBOR

State

MI

Zip Code

48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 15 2025

Transaction ID : SA11AI.69052

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COLLINS, KATHERINE, C, ,

**C.**

Mailing Address 1008 MALLARD POINTE DR

City

CEDAR HILL

State

TX

Zip Code

75104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 01 2025

Transaction ID : SA11AI.70152

Amount of Each Receipt this Period

300.00

☐ 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)

PAGE 26 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CRARY, WILLIAM, O, MR,

**A.**

Mailing Address 6051 HAHN RD

City  
DANEState  
WIZip Code  
53529FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 29 2025

Transaction ID : SA11AI.71595

Amount of Each Receipt this Period

50.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CULLENS, DOROTHY, , MS,

Mailing Address 56 BURNS RD

City  
N BRUNSWICKState  
NJZip Code  
08902FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 19 2025

Transaction ID : SA11AI.69283

Amount of Each Receipt this Period

50.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

CURRAN, WILLIAM, E, MR,

Mailing Address 4601 HIGHWAY A1A APT 501

City  
VERO BEACHState  
FLZip Code  
32963FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 10 2025

Transaction ID : SA11AI.71869

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)..... ▶

350.00

**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 27 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DAHL, TIMOTHY, , ,

**A.**

Mailing Address 1870 E SHORE DR

City

SAINT PAUL

State

MN

Zip Code

55109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 19 / 2025D D / Y Y Y Y Y  
19 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.69485

Amount of Each Receipt this Period

35.00



Memo Item

Full Name (Last, First, Middle Initial)

DANIELS, AUDREY, , MS,

**B.**

Mailing Address 544 S STATE ROAD 301

City

BLUFFTON

State

IN

Zip Code

46714

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 06 / 2025D D / Y Y Y Y Y  
06 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.68906

Amount of Each Receipt this Period

35.00



Memo Item

Full Name (Last, First, Middle Initial)

DANIELS, GEORGE, G, ,

**C.**

Mailing Address 526 THORPE RD

City

ORLANDO

State

FL

Zip Code

32824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 22 / 2025D D / Y Y Y Y Y  
22 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.71937

Amount of Each Receipt this Period

7000.00



Memo Item

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

7070.00

**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 28 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DAVISON, RICHARD, , MR,

**A.**

Mailing Address 275 BAYSHORE BLVD UNIT 1600

City

TAMPA

State

FL

Zip Code

33606

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.68491

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

DENNIS, DONALD, D, MR,

**B.**

Mailing Address 5751 GREEN HILL RD APT 412

City

SAN ANGELO

State

TX

Zip Code

76901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

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

Transaction ID : SA11AI.71507

Amount of Each Receipt this Period

75.00



Memo Item

Full Name (Last, First, Middle Initial)

DETERS, MERLIN, L, MRS,

**C.**

Mailing Address 249 NORTH ST

City

BAILEYVILLE

State

KS

Zip Code

66404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11AI.70036

Amount of Each Receipt this Period

50.00



Memo Item

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

625.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DETERS, MERLIN, L, MRS,

**A.**

Mailing Address 249 NORTH ST

City

BAILEYVILLE

State

KS

Zip Code

66404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.70035

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

DETERS, MERLIN, L, MRS,

**B.**

Mailing Address 249 NORTH ST

City

BAILEYVILLE

State

KS

Zip Code

66404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : SA11AI.68763

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

DETERS, MERLIN, L, MRS,

**C.**

Mailing Address 249 NORTH ST

City

BAILEYVILLE

State

KS

Zip Code

66404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 25 2025

Transaction ID : SA11AI.68764

Amount of Each Receipt this Period

1000.00



Memo Item

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

1100.00

**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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DOUGLASS, DONALD, , ,

**A.**

Mailing Address 8961 LAKE DRIVE #306

#306

City

CAPE CANAVERAL

State

FL

Zip Code

32920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.71431

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

ELLIOTT, DONNA, L, MS,

**B.**

Mailing Address 520 LAKE LOUISE CIR UNIT 703

City

NAPLES

State

FL

Zip Code

34110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.70172

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

FARRAR, JANICE, , MS,

**C.**

Mailing Address 287 ROCK CAMP RD

City

HUNDRED

State

WV

Zip Code

26575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.69307

Amount of Each Receipt this Period

250.00



Memo Item

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

550.00

**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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FARRAR, JANICE, , MS,

**A.**

Mailing Address 287 ROCK CAMP RD

City

HUNDRED

State

WV

Zip Code

26575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID : SA11AI.72031

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FERGUSON, FRANKLIN, A, MR,

**B.**

Mailing Address 1496 BEACON ST

City

BROOKLINE

State

MA

Zip Code

02446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

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

Transaction ID : SA11AI.68866

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FINEGAN, PAUL, , ,

**C.**

Mailing Address 1455 DENISE DR

City

RIPON

State

CA

Zip Code

95366

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.72056

Amount of Each Receipt this Period

100.00

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

450.00

**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 32 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FINGERSON, MARY, ANN, MRS,

**A.** Mailing Address 4900 OAKLAWN LN NW

City

ROCHESTER

State

MN

Zip Code

55901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71124

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FLINN, LAWRENCE, , , JR

**B.** Mailing Address 11 INDIAN CHASE DR

City

GREENWICH

State

CT

Zip Code

06830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : SA11AI.69891

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRAKER, DEAN, A, MR,

**C.** Mailing Address 1295 W COOK RD

City

MANSFIELD

State

OH

Zip Code

44906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

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

Transaction ID : SA11AI.71026

Amount of Each Receipt this Period

35.00

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

610.00

**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 33 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FRAKER, DEAN, A, MR,

Mailing Address 1295 W COOK RD

City  
MANSFIELDState  
OHZip Code  
44906FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 21 2025

Transaction ID : SA11AI.71025

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRANK, VENNA, , ,

Mailing Address 6324 EMERALD ST

City  
ALTA LOMAState  
CAZip Code  
91701FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 11 2025

Transaction ID : SA11AI.70738

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRANK, VENNA, , ,

Mailing Address 6324 EMERALD ST

City  
ALTA LOMAState  
CAZip Code  
91701FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 25 2025

Transaction ID : SA11AI.70739

Amount of Each Receipt this Period

35.00

☐ Memo Item

135.00

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

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

PAGE 34 OF 120

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

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

NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Franklin, Marc, , ,

**A.**

Mailing Address 2405 NW 49TH LN

City

BOCA RATON

State

FL

Zip Code

33431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 03 2025

Transaction ID : SA11AI.70040

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

GRIMMER, KATHLEEN, , ,

Mailing Address 14375 VIOLET CIR

City

CEDAR LAKE

State

IN

Zip Code

46303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11AI.72149

Amount of Each Receipt this Period

35.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

GRIMMER, KATHLEEN, , ,

Mailing Address 14375 VIOLET CIR

City

CEDAR LAKE

State

IN

Zip Code

46303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 08 2025

Transaction ID : SA11AI.72151

Amount of Each Receipt this Period

35.00

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

570.00

**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 35 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GRIMMER, KATHLEEN, , ,

**A.**

Mailing Address 14375 VIOLET CIR

City

CEDAR LAKE

State

IN

Zip Code

46303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 22 2025

Transaction ID : SA11AI.72152

Amount of Each Receipt this Period

35.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

GRIMMER, KATHLEEN, , ,

Mailing Address 14375 VIOLET CIR

City

CEDAR LAKE

State

IN

Zip Code

46303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

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

Transaction ID : SA11AI.72150

Amount of Each Receipt this Period

45.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

GROVE, VIRGINIA, L, ,

Mailing Address 818 COUNTRY ESTATES DR

City

WINCHESTER

State

TN

Zip Code

37398

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 01 2025

Transaction ID : SA11AI.70703

Amount of Each Receipt this Period

35.00

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

115.00

**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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GROVE, VIRGINIA, L, ,

**A.**

Mailing Address 818 COUNTRY ESTATES DR

City

WINCHESTER

State

TN

Zip Code

37398

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

315.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 1 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.69205

Amount of Each Receipt this Period

35.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

HADLEY, CHARLES, A, MR,

Mailing Address 4840 THUNDERBIRD DR APT 383

City

BOULDER

State

CO

Zip Code

80303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED VET

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : SA11AI.69840

Amount of Each Receipt this Period

350.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

HADLEY, CHARLES, A, MR,

Mailing Address 4840 THUNDERBIRD DR APT 383

City

BOULDER

State

CO

Zip Code

80303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED VET

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 7 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.68573

Amount of Each Receipt this Period

250.00



Memo Item

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

635.00

**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 37 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HADLEY, CHARLES, A, MR,

**A.** Mailing Address 4840 THUNDERBIRD DR APT 383City  
BOULDERState  
COZip Code  
80303FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED VET

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 18 2025

Transaction ID : SA11AI.71419

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HADLEY, CHARLES, A, MR,

**B.** Mailing Address 4840 THUNDERBIRD DR APT 383City  
BOULDERState  
COZip Code  
80303FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED VET

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 25 2025

Transaction ID : SA11AI.71418

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HAMMONS, JOYCE, , ,

**C.** Mailing Address 3525 NEW DELHI DRCity  
WINSTON SALEMState  
NCZip Code  
27101FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

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

Transaction ID : SA11AI.72090

Amount of Each Receipt this Period

35.00

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

485.00

**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 38 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS****A.**Full Name (Last, First, Middle Initial)  
HOLLINS, LEONA, JEAN, MRS,

Mailing Address 1615 S 13TH ST

City  
COUNCIL BLUFFSState  
IAZip Code  
51501FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED HOUSEWIFE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71753

Amount of Each Receipt this Period

600.00

☐ Memo Item**B.**Full Name (Last, First, Middle Initial)  
HOLTON, LEYLA, G., ,

Mailing Address 10288 IRON ORE RD

City  
CONROEState  
TXZip Code  
77303FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.69672

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.**Full Name (Last, First, Middle Initial)  
HOLTZHOUSE, EDWARD, P, DR, DDS

Mailing Address 5702 LORETTA CT

City  
ZEPHYRHILLSState  
FLZip Code  
33542FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11AI.71846

Amount of Each Receipt this Period

30.00

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

730.00

**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 39 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOOK, JOANNE, H, MRS,

**A.**

Mailing Address 4141 S BRAESWOOD BLVD APT 1142

City

HOUSTON

State

TX

Zip Code

77025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.71460

Amount of Each Receipt this Period

250.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C, MR,

Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

385.00

Date of Receipt

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

Transaction ID : SA11AI.70016

Amount of Each Receipt this Period

75.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C, MR,

Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

485.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 2 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.68747

Amount of Each Receipt this Period

100.00



Memo Item

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

425.00

**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 40 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C, MR,

**A.** Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

560.00

Date of Receipt

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

Transaction ID : SA11AI.72297

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C, MR,

**B.** Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

635.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 24 2025

Transaction ID : SA11AI.72299

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C, MR,

**C.** Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

660.00

Date of Receipt

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

Transaction ID : SA11AI.71563

Amount of Each Receipt this Period

25.00

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

175.00

**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 41 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HUTCHINGS, MELVIN, , MR,

**A.**

Mailing Address 4647 E 150 N

City  
RIGBYState  
IDZip Code  
83442FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

335.00

Date of Receipt

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

Transaction ID : SA11AI.70859

Amount of Each Receipt this Period

200.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

HUTCHINGS, MELVIN, , MR,

Mailing Address 4647 E 150 N

City  
RIGBYState  
IDZip Code  
83442FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

370.00

Date of Receipt

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

Transaction ID : SA11AI.72046

Amount of Each Receipt this Period

35.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

JARDINE, D, LINDSAY, MR,

Mailing Address 208 W FAIRWOOD DR

City  
CHALFONTState  
PAZip Code  
18914FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 08 2025

Transaction ID : SA11AI.71863

Amount of Each Receipt this Period

50.00

☐ Memo Item

285.00

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

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

PAGE 42 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KAUFMAN, EMILY, , MRS.,

**A.**

Mailing Address 8185 VIA ACHO RD

#880333

City

BOCA RATON

State

FL

Zip Code

33433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

TEACHER

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : SA11AI.72325

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

KAUFMAN, EMILY, , MRS.,

Mailing Address 8185 VIA ACHO RD

#880333

City

BOCA RATON

State

FL

Zip Code

33433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

TEACHER

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : SA11AI.72324

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

KINZEL, CHRISTEL, , MISS,

Mailing Address 100 HOMEWOOD WAY APT 126

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

205.00

Date of Receipt

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

Transaction ID : SA11AI.68946

Amount of Each Receipt this Period

35.00

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

7035.00

**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 43 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KINZEL, CHRISTEL, , MISS,

**A.**

Mailing Address 100 HOMEWOOD WAY APT 126

City

HANOVER

State

PA

Zip Code

17331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

240.00

Date of Receipt

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

Transaction ID : SA11AI.71738

Amount of Each Receipt this Period

35.00



Memo Item

Full Name (Last, First, Middle Initial)

KOREN, MICHAEL, , MR,

**B.**

Mailing Address 253 LINKSIDE CIR

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.69855

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

KOVAL, MERRY, A, MS,

**C.**

Mailing Address 1422 JUNIPER DR

City

ALAMOGORDO

State

NM

Zip Code

88310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

380.00

Date of Receipt

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

Transaction ID : SA11AI.71825

Amount of Each Receipt this Period

250.00



Memo Item

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

535.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KOVAL, MERRY, A, MS,

**A.**

Mailing Address 1422 JUNIPER DR

City

ALAMOGORDO

State

NM

Zip Code

88310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 23 2025

Transaction ID : SA11AI.71823

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

**B.**

Mailing Address 5943 CHIMNEY ROCK DR

City

HOSCHTON

State

GA

Zip Code

30548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 01 2025

Transaction ID : SA11AI.70991

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

**C.**

Mailing Address 5943 CHIMNEY ROCK DR

City

HOSCHTON

State

GA

Zip Code

30548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 09 2025

Transaction ID : SA11AI.70989

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

310.00

**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 45 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

**A.**

Mailing Address 5943 CHIMNEY ROCK DR

City

HOSCHTON

State

GA

Zip Code

30548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

263.00

Date of Receipt

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

Transaction ID : SA11AI.70990

Amount of Each Receipt this Period

28.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

Mailing Address 5943 CHIMNEY ROCK DR

City

HOSCHTON

State

GA

Zip Code

30548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 21 / 2025

Transaction ID : SA11AI.70993

Amount of Each Receipt this Period

28.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

Mailing Address 5943 CHIMNEY ROCK DR

City

HOSCHTON

State

GA

Zip Code

30548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

319.00

Date of Receipt

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

Transaction ID : SA11AI.70992

Amount of Each Receipt this Period

28.00



Memo Item

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

84.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 46 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

**A.**

Mailing Address 5943 CHIMNEY ROCK DR

City

HOSCHTON

State

GA

Zip Code

30548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

354.00

Date of Receipt

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

Transaction ID : SA11AI.69394

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

**B.**

Mailing Address 5943 CHIMNEY ROCK DR

City

HOSCHTON

State

GA

Zip Code

30548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

389.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 21 2025

Transaction ID : SA11AI.69393

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

**C.**

Mailing Address 5943 CHIMNEY ROCK DR

City

HOSCHTON

State

GA

Zip Code

30548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

417.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 26 2025

Transaction ID : SA11AI.69395

Amount of Each Receipt this Period

28.00

☐ Memo Item

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

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

98.00

**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 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

**A.**

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

447.00

Date of Receipt

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

Transaction ID : SA11AI.72120

Amount of Each Receipt this Period

30.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

LATHAM, ROY, L, MR,

Mailing Address 5943 CHIMNEY ROCK DR

City  
HOSCHTONState  
GAZip Code  
30548FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

482.00

Date of Receipt

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

Transaction ID : SA11AI.72121

Amount of Each Receipt this Period

35.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

LAUHOFF, VERA, , MRS,

Mailing Address 133 SABINE ST

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

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 8 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.70408

Amount of Each Receipt this Period

35.00

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

100.00

**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 48 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LYON, YVONNE, M, MRS,

**A.**

Mailing Address 3025 LEPRECHAUN LN

City

PALM HARBOR

State

FL

Zip Code

34683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.69625

Amount of Each Receipt this Period

250.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

MACKAIG, RICHARD, A, MR,

Mailing Address 25422 SEA BLUFFS DR UNIT 6208

City

DANA POINT

State

CA

Zip Code

92629

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y |
| 0 | 9 |   |   | 3 | 0 |   | 2 | 0 | 5 |   |   |

Transaction ID : SA11AI.71411

Amount of Each Receipt this Period

260.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

MAPLE, RALPH, E, MR,

Mailing Address 5215 VALLEY BLUFF LN

City

KATY

State

TX

Zip Code

77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : SA11AI.70351

Amount of Each Receipt this Period

250.00



Memo Item

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

760.00

**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 49 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MAPLE, RALPH, E, MR,

Mailing Address 5215 VALLEY BLUFF LN

City  
KATYState  
TXZip Code  
77494FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1800.00

Date of Receipt

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

Transaction ID : SA11AI.71761

Amount of Each Receipt this Period

1000.00

☐ Memo Item

A.

Full Name (Last, First, Middle Initial)

MAPLE, RALPH, E, MR,

Mailing Address 5215 VALLEY BLUFF LN

City  
KATYState  
TXZip Code  
77494FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : SA11AI.71762

Amount of Each Receipt this Period

700.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

MASON, DEANNA, L, MS,

Mailing Address 5532 E KATHERINE VILLAS PL UNIT A

City  
BULLHEAD CITYState  
AZZip Code  
86429FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71913

Amount of Each Receipt this Period

35.00

☐ Memo Item

C.

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

1735.00

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 50 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MAY, DOROTHY, J, MRS,

**A.**

Mailing Address 8207 ARBOR CT

City

FORT MYERS

State

FL

Zip Code

33908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 3 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.72141

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCCRUM, E, S, MRS,

**B.**

Mailing Address 3 STONEGATE CT

City

BROWNWOOD

State

TX

Zip Code

76801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.69976

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCMILLAN, SUZANNE, I, MRS,

**C.**

Mailing Address 185 GOLDENWAVE LOOP

City

MONTGOMERY

State

TX

Zip Code

77316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.71314

Amount of Each Receipt this Period

200.00

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

550.00

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

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

PAGE 51 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MELVIN, DORIS, P, MRS,

**A.**

Mailing Address 14601 RAMBLEWOOD DR

City

CHESTER

State

VA

Zip Code

23836

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.69267

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

MIDDLETON, GERALDINE, C, MISS,

Mailing Address PO BOX 2607

City

PISMO BEACH

State

CA

Zip Code

93448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : SA11AI.70856

Amount of Each Receipt this Period

700.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

MIDDLETON, GERALDINE, C, MISS,

Mailing Address PO BOX 2607

City

PISMO BEACH

State

CA

Zip Code

93448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.70855

Amount of Each Receipt this Period

500.00

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

1300.00

**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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MIDDLETON, GERALDINE, C, MISS,

**A.**

Mailing Address PO BOX 2607

City

PISMO BEACH

State

CA

Zip Code

93448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 3 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.72043

Amount of Each Receipt this Period

100.00



Memo Item

Full Name (Last, First, Middle Initial)

Milan, William, , ,

**B.**

Mailing Address 1258 E 2625 N

City

Ogden

State

UT

Zip Code

84414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.68457

Amount of Each Receipt this Period

150.00



Memo Item

Full Name (Last, First, Middle Initial)

MILLER, MARY, VIRGINIA, MRS,

**C.**

Mailing Address PO BOX 7543

City

HUNTSVILLE

State

TX

Zip Code

77342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED CPA

Occupation

RETIRED CPA

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 7 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.68675

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 Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MONDIN, PRIMO, J, ,

**A.**

Mailing Address 101 KING CIR

City

LOUISBURG

State

NC

Zip Code

27549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 13 2025

Transaction ID : SA11AI.69178

Amount of Each Receipt this Period

54.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MONTERO, HELEN, , ,

**B.**

Mailing Address 97 SOMERSET ST

City

BELMONT

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 01 2025

Transaction ID : SA11AI.70898

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MONTERO, HELEN, , ,

**C.**

Mailing Address 97 SOMERSET ST

City

BELMONT

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11AI.70897

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

154.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 54 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MONTERO, HELEN, , ,

**A.**

Mailing Address 97 SOMERSET ST

City

BELMONT

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 11 2025

Transaction ID : SA11AI.70899

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MONTERO, HELEN, , ,

**B.**

Mailing Address 97 SOMERSET ST

City

BELMONT

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 21 2025

Transaction ID : SA11AI.70900

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MONTERO, HELEN, , ,

**C.**

Mailing Address 97 SOMERSET ST

City

BELMONT

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

575.00

Date of Receipt

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

Transaction ID : SA11AI.69339

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

225.00

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

PAGE 55 OF 120

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

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

NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MONTERO, HELEN, , ,

**A.**

Mailing Address 97 SOMERSET ST

City

BELMONT

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

Date of Receipt

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

Transaction ID : SA11AI.69340

Amount of Each Receipt this Period

50.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

MONTERO, HELEN, , ,

Mailing Address 97 SOMERSET ST

City

BELMONT

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID : SA11AI.72069

Amount of Each Receipt this Period

75.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

MONTERO, HELEN, , ,

Mailing Address 97 SOMERSET ST

City

BELMONT

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : SA11AI.72304

Amount of Each Receipt this Period

50.00

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

175.00

**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 56 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MONTERO, HELEN, , ,

**A.**

Mailing Address 97 SOMERSET ST

City

BELMONT

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

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

Transaction ID : SA11AI.72070

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NGUYEN, LOIS, T, ,

**B.**

Mailing Address 6102 76TH ST

City

LUBBOCK

State

TX

Zip Code

79424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11AI.72175

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NIEMANN, NANCY, A, ,

**C.**

Mailing Address 18 DOGWOOD RD

City

MORRIS PLAINS

State

NJ

Zip Code

07950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.71545

Amount of Each Receipt this Period

100.00

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

225.00

**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 57 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NORMAN, GERALD, F, MR,

**A.** Mailing Address 400 N TIGERTAIL RD

City

LOS ANGELES

State

CA

Zip Code

90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 29 2025

Transaction ID : SA11AI.71322

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

O'ROURKE, RICHARD, J, MR,

**B.** Mailing Address 19151 SE 135TH CT UNIT 14

City

DUNNELLON

State

FL

Zip Code

34431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 27 2025

Transaction ID : SA11AI.72322

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

O'ROURKE, RICHARD, J, MR,

**C.** Mailing Address 19151 SE 135TH CT UNIT 14

City

DUNNELLON

State

FL

Zip Code

34431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

222.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 29 2025

Transaction ID : SA11AI.72071

Amount of Each Receipt this Period

20.00

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

292.00

**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 58 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ODDER, M, P, MS,

**A.**

Mailing Address 300 KING GEORGE III ST

City

DAGSBORO

State

DE

Zip Code

19939

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 08 2025

Transaction ID : SA11AI.71272

Amount of Each Receipt this Period

150.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

OLDFIELD, CINDY, , MS,

Mailing Address 246 CONGRESS ST

City

MILFORD

State

MA

Zip Code

01757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 26 2025

Transaction ID : SA11AI.69184

Amount of Each Receipt this Period

35.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

OLDFIELD, CINDY, , MS,

Mailing Address 246 CONGRESS ST

City

MILFORD

State

MA

Zip Code

01757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 26 2025

Transaction ID : SA11AI.69185

Amount of Each Receipt this Period

100.00

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

285.00

**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 59 OF 120

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

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

NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**Full Name (Last, First, Middle Initial)  
OLDFIELD, CYNTHIA, J, MS,

Mailing Address 246 CONGRESS ST

City  
MILFORDState  
MAZip Code  
01757FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 03 2025

Transaction ID : SA11AI.71931

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
OLDFIELD, CYNTHIA, J, MS,

Mailing Address 246 CONGRESS ST

City  
MILFORDState  
MAZip Code  
01757FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 03 2025

Transaction ID : SA11AI.71933

Amount of Each Receipt this Period

100.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
OLDFIELD, CYNTHIA, J, MS,

Mailing Address 246 CONGRESS ST

City  
MILFORDState  
MAZip Code  
01757FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 23 2025

Transaction ID : SA11AI.71932

Amount of Each Receipt this Period

100.00

☐ Memo Item

700.00

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

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

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

PAGE 60 OF 120

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

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

NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

OLIVER, WYNELL, C, MS,

**A.**

Mailing Address 1028 N PLANTATION PKWY

City

MACON

State

GA

Zip Code

31220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.70680

Amount of Each Receipt this Period

250.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

ONION, WILLIAM, S, ,

Mailing Address 5128 FAWN GROVE RD

City

PYLESVILLE

State

MD

Zip Code

21132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.68942

Amount of Each Receipt this Period

100.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

ONION, WILLIAM, S, ,

Mailing Address 5128 FAWN GROVE RD

City

PYLESVILLE

State

MD

Zip Code

21132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

675.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71734

Amount of Each Receipt this Period

175.00



Memo Item

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

525.00

**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 61 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

OSBORNE, AUDREY, , ,

**A.**

Mailing Address 3807 PALISADES PL W

City

UNIVERSITY PLACE

State

WA

Zip Code

98466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.72023

Amount of Each Receipt this Period

25.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

OSBORNE, AUDREY, , ,

Mailing Address 3807 PALISADES PL W

City

UNIVERSITY PLACE

State

WA

Zip Code

98466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.72022

Amount of Each Receipt this Period

35.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

PAINTER, HOWARD, W, MR,

Mailing Address 41 WILBURTHA RD

City

EWING

State

NJ

Zip Code

08628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

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

Transaction ID : SA11AI.70842

Amount of Each Receipt this Period

35.00

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

95.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 62 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PAINTER, HOWARD, W, MR,

**A.**

Mailing Address 41 WILBURTHA RD

City

EWING

State

NJ

Zip Code

08628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

315.00

Date of Receipt

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

Transaction ID : SA11AI.70841

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAINTER, HOWARD, W, MR,

**B.**

Mailing Address 41 WILBURTHA RD

City

EWING

State

NJ

Zip Code

08628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11AI.69305

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAINTER, HOWARD, W, MR,

**C.**

Mailing Address 41 WILBURTHA RD

City

EWING

State

NJ

Zip Code

08628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 21 2025

Transaction ID : SA11AI.69304

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

120.00

**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)

**JOE KAUFMAN FOR CONGRESS****A.**

Full Name (Last, First, Middle Initial)

PAINTER, HOWARD, W, MR,

Mailing Address 41 WILBURTHA RD

City

EWING

State

NJ

Zip Code

08628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 03 / 2025

03

2025

Transaction ID : SA11AI.72028

Amount of Each Receipt this Period

35.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

PAINTER, HOWARD, W, MR,

Mailing Address 41 WILBURTHA RD

City

EWING

State

NJ

Zip Code

08628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 24 / 2025

24

2025

Transaction ID : SA11AI.72027

Amount of Each Receipt this Period

35.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

PETTYJOHN, KAREN, E, MISS,

Mailing Address 828 DRESSER DR

City

ANDERSON

State

IN

Zip Code

46011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

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

02

2025

Transaction ID : SA11AI.72093

Amount of Each Receipt this Period

100.00



Memo Item

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

170.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
PETTYJOHN, KAREN, E, MISS,

Mailing Address 828 DRESSER DR

City  
ANDERSON

State  
IN

Zip Code  
46011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 16 2025

Transaction ID : SA11AI.72095

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
PETTYJOHN, KAREN, E, MISS,

Mailing Address 828 DRESSER DR

City  
ANDERSON

State  
IN

Zip Code  
46011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

307.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 24 2025

Transaction ID : SA11AI.72094

Amount of Each Receipt this Period

37.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
PUTZAN, CONRAD, S, MR,

Mailing Address 1245 BEACH RD

City  
RIVIERA BEACH

State  
FL

Zip Code  
33404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 26 2025

Transaction ID : SA11AI.68576

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

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

82.00

**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 65 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

REGER, CAROL, A, MS,

**A.**

Mailing Address 170 WINDSOR RD

City

PARAMUS

State

NJ

Zip Code

07652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 22 2025

Transaction ID : SA11AI.68973

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REGER, CAROL, A, MS,

**B.**

Mailing Address 170 WINDSOR RD

City

PARAMUS

State

NJ

Zip Code

07652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 26 2025

Transaction ID : SA11AI.71757

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REINHARD, CAROL, , ,

**C.**

Mailing Address 3511 HOLLY RD

City

DOVER

State

PA

Zip Code

17315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 25 2025

Transaction ID : SA11AI.71131

Amount of Each Receipt this Period

25.00

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

95.00

**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 66 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

REINHARD, CAROL, , ,

**A.**

Mailing Address 3511 HOLLY RD

City

DOVER

State

PA

Zip Code

17315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

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

Transaction ID : SA11AI.69500

Amount of Each Receipt this Period

25.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

REINHARD, CAROL, , ,

Mailing Address 3511 HOLLY RD

City

DOVER

State

PA

Zip Code

17315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

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

Transaction ID : SA11AI.69499

Amount of Each Receipt this Period

25.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

REINHARD, CAROL, , ,

Mailing Address 3511 HOLLY RD

City

DOVER

State

PA

Zip Code

17315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

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

Transaction ID : SA11AI.69498

Amount of Each Receipt this Period

25.00

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

75.00

**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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

REINHARD, Donald, G, ,

**A.**

Mailing Address 75 HARVARD AVE

City

PALMERTON

State

PA

Zip Code

18071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 8 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.69761

Amount of Each Receipt this Period

250.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

REINHARD, Donald, G, ,

Mailing Address 75 HARVARD AVE

City

PALMERTON

State

PA

Zip Code

18071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 9 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.69760

Amount of Each Receipt this Period

250.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

REINHARD, Donald, G, ,

Mailing Address 75 HARVARD AVE

City

PALMERTON

State

PA

Zip Code

18071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID : SA11AI.71368

Amount of Each Receipt this Period

250.00

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

750.00

**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 68 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

REINHARD, Donald, G, ,

**A.**

Mailing Address 75 HARVARD AVE

City

PALMERTON

State

PA

Zip Code

18071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : SA11AI.71369

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REPSOLD, CORINNE, A, ,

**B.**

Mailing Address 674 SE 38TH DR

City

GRESHAM

State

OR

Zip Code

97080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.68479

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RETTERRATH, MARIAN, L, MS,

**C.**

Mailing Address 2624 COUNTY ROAD B16

City

CALMAR

State

IA

Zip Code

52132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.70102

Amount of Each Receipt this Period

250.00

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

600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 69 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ROGERS, C, B, MR, JR

**A.**

Mailing Address 381 INDIAN HARBOR RD

City

VERO BEACH

State

FL

Zip Code

32963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.70760

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RUMPH, SCOTT, , MR, III

**B.**

Mailing Address 5 LEWIS CIR

City

SUMTER

State

SC

Zip Code

29154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 18 2025

Transaction ID : SA11AI.70087

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SACKETT, RONALD, J, MR,

**C.**

Mailing Address 4830 FORD AVE NW

City

CEDAR RAPIDS

State

IA

Zip Code

52405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 10 2025

Transaction ID : SA11AI.71852

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)..... ▶

1000.00

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

PAGE 70 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SANCHEZ, EUSEBIA, Q, ,

**A.**

Mailing Address 2521 W VIOLET ST

City

TAMPA

State

FL

Zip Code

33614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

515.00

Date of Receipt

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

Transaction ID : SA11AI.71714

Amount of Each Receipt this Period

10.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

SANCHEZ, EUSEBIA, Q, ,

Mailing Address 2521 W VIOLET ST

City

TAMPA

State

FL

Zip Code

33614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

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

Transaction ID : SA11AI.71715

Amount of Each Receipt this Period

10.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

SCHALL, JAMES, E, DR,

Mailing Address 415 MIFFLIN ST

City

HUNTINGDON

State

PA

Zip Code

16652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMES E VAN ZANDT VAMC

Occupation

PHYSICIAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.70478

Amount of Each Receipt this Period

250.00



Memo Item

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

270.00

**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 71 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHALL, JAMES, E, DR,

**A.**

Mailing Address 415 MIFFLIN ST

City

HUNTINGDON

State

PA

Zip Code

16652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMES E VAN ZANDT VAMC

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.70479

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

SCHALL, JAMES, E, DR,

Mailing Address 415 MIFFLIN ST

City

HUNTINGDON

State

PA

Zip Code

16652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMES E VAN ZANDT VAMC

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.70477

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SCHALL, JAMES, E, DR,

Mailing Address 415 MIFFLIN ST

City

HUNTINGDON

State

PA

Zip Code

16652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMES E VAN ZANDT VAMC

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID : SA11AI.69061

Amount of Each Receipt this Period

250.00

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

1250.00

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

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

PAGE 72 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHALL, JAMES, E, DR,

**A.**

Mailing Address 415 MIFFLIN ST

City

HUNTINGDON

State

PA

Zip Code

16652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMES E VAN ZANDT VAMC

Occupation

PHYSICIAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

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

Transaction ID : SA11AI.71836

Amount of Each Receipt this Period

500.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

SCHALL, JAMES, E, DR,

Mailing Address 415 MIFFLIN ST

City

HUNTINGDON

State

PA

Zip Code

16652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMES E VAN ZANDT VAMC

Occupation

PHYSICIAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2750.00

Date of Receipt

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

Transaction ID : SA11AI.71837

Amount of Each Receipt this Period

500.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

SCHATTYN, JOHN, , ,

Mailing Address 129 CROCKETT DR

City

KERRVILLE

State

TX

Zip Code

78028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

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

Transaction ID : SA11AI.70390

Amount of Each Receipt this Period

100.00



Memo Item

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

1100.00

**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 73 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHATTYN, JOHN, , ,

**A.** Mailing Address 129 CROCKETT DRCity  
KERRVILLEState  
TXZip Code  
78028FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 07 2025

Transaction ID : SA11AI.69011

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
SCHATTYN, JOHN, , ,  
Mailing Address 129 CROCKETT DRCity  
KERRVILLEState  
TXZip Code  
78028FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 19 2025

Transaction ID : SA11AI.69012

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
SCHATTYN, JOHN, , ,  
Mailing Address 129 CROCKETT DRCity  
KERRVILLEState  
TXZip Code  
78028FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 03 2025

Transaction ID : SA11AI.71786

Amount of Each Receipt this Period

100.00

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

300.00

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

PAGE 74 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHATTYN, JOHN, , ,

**A.** Mailing Address 129 CROCKETT DRCity  
KERRVILLEState  
TXZip Code  
78028FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 26 2025

Transaction ID : SA11AI.71787

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCHWEINSHAUT, KURT, , ,

**B.** Mailing Address 15 ANGELA WAYCity  
WEST BARNSTABLEState  
MAZip Code  
02668FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11AI.68967

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**C.** Mailing Address 9778 SW COQUILLE CTCity  
TUALATINState  
ORZip Code  
97062FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

257.00

Date of Receipt

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

Transaction ID : SA11AI.71036

Amount of Each Receipt this Period

39.00

☐ Memo Item

289.00

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

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

PAGE 75 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**A.** Mailing Address 9778 SW COQUILLE CT

City

TUALATIN

State

OR

Zip Code

97062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

292.00

Date of Receipt

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

Transaction ID : SA11AI.71039

Amount of Each Receipt this Period

35.00



Memo Item

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**B.** Mailing Address 9778 SW COQUILLE CT

City

TUALATIN

State

OR

Zip Code

97062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

331.00

Date of Receipt

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

Transaction ID : SA11AI.71038

Amount of Each Receipt this Period

39.00



Memo Item

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**C.** Mailing Address 9778 SW COQUILLE CT

City

TUALATIN

State

OR

Zip Code

97062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

369.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71037

Amount of Each Receipt this Period

38.00



Memo Item

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

112.00

**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 76 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**A.** Mailing Address 9778 SW COQUILLE CT

City

TUALATIN

State

OR

Zip Code

97062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

409.00

Date of Receipt

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

Transaction ID : SA11AI.69420

Amount of Each Receipt this Period

40.00



Memo Item

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**B.** Mailing Address 9778 SW COQUILLE CT

City

TUALATIN

State

OR

Zip Code

97062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

449.00

Date of Receipt

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

Transaction ID : SA11AI.69419

Amount of Each Receipt this Period

40.00



Memo Item

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**C.** Mailing Address 9778 SW COQUILLE CT

City

TUALATIN

State

OR

Zip Code

97062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

495.00

Date of Receipt

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

Transaction ID : SA11AI.69418

Amount of Each Receipt this Period

46.00



Memo Item

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

126.00

**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 77 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**A.** Mailing Address 9778 SW COQUILLE CTCity  
TUALATINState  
ORZip Code  
97062FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

533.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 0 | 3 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.72153

Amount of Each Receipt this Period

38.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**B.** Mailing Address 9778 SW COQUILLE CTCity  
TUALATINState  
ORZip Code  
97062FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

577.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 1 | 5 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.72155

Amount of Each Receipt this Period

44.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M, MRS,

**C.** Mailing Address 9778 SW COQUILLE CTCity  
TUALATINState  
ORZip Code  
97062FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

627.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 2 | 6 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.72154

Amount of Each Receipt this Period

50.00

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

132.00

**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 78 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SHERMAN, DAWN, , ,

**A.**

Mailing Address 11 CRITTER WAY

City

MOXEE

State

WA

Zip Code

98936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

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

Transaction ID : SA11AI.69370

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SHIRLEY, PHYLLIS, , MS,

**B.**

Mailing Address 530 1ST AVE APT 17

City

TWO HARBORS

State

MN

Zip Code

55616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

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

Transaction ID : SA11AI.72180

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SHOEMAKER, SHIRLEY, , ,

**C.**

Mailing Address 10728 FORT ASHBY RD

City

KEYSER

State

WV

Zip Code

26726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71060

Amount of Each Receipt this Period

35.00

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

120.00

**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 79 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SHOEMAKER, SHIRLEY, , ,

**A.** Mailing Address 10728 FORT ASHBY RDCity  
KEYSERState  
WVZip Code  
26726FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 8 |  | 2 | 6 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.69430

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STADLER, JAMES, R, MRS,

**B.** Mailing Address 314 WALNUT DRCity  
NASHVILLEState  
TNZip Code  
37205FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOUSEWIFE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 9 |  | 3 | 0 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.71283

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STERLING, MARGARET, JEAN, MRS,

**C.** Mailing Address PO BOX 1866City  
GREENEVILLEState  
TNZip Code  
37744FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED RN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

|   |   |  |   |   |  |   |   |   |   |
|---|---|--|---|---|--|---|---|---|---|
| M | M |  | D | D |  | Y | Y | Y | Y |
| 0 | 8 |  | 1 | 5 |  | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.69169

Amount of Each Receipt this Period

250.00

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

535.00

**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 80 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STERLING, MARGARET, JEAN, MRS,

**A.**

Mailing Address PO BOX 1866

City

GREENEVILLE

State

TN

Zip Code

37744

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED RN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : SA11AI.69171

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

STERLING, MARGARET, JEAN, MRS,

Mailing Address PO BOX 1866

City

GREENEVILLE

State

TN

Zip Code

37744

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED RN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID : SA11AI.69170

Amount of Each Receipt this Period

250.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.69674

Amount of Each Receipt this Period

50.00

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

400.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

**A.**

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 22 2025

Transaction ID : SA11AI.69676

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

**B.**

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : SA11AI.69675

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

**C.**

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.68435

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

**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 82 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

**A.**

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 1 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.68434

Amount of Each Receipt this Period

50.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 1 | 5 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.68431

Amount of Each Receipt this Period

50.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 2 | 1 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.68433

Amount of Each Receipt this Period

50.00



Memo Item

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

150.00

**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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

**A.**

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID : SA11AI.68432

Amount of Each Receipt this Period

50.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 3 |   | 2 | 0 | 5 |   |

Transaction ID : SA11AI.71315

Amount of Each Receipt this Period

50.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, E, MR,

Mailing Address 4601 LAFAYETTE AVE

City

FORT WORTH

State

TX

Zip Code

76107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STEWART PLLC

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : SA11AI.71316

Amount of Each Receipt this Period

50.00

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

150.00

**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 84 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

|                                                                                                                                                 |             |                                              |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------------------|------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>SUNKLER, MARGARET, L, MRS,<br>Mailing Address 88794 SHERRILL LN                            |             |                                              | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>09 / 12 / 2025 |  |
| City<br>BANDON                                                                                                                                  | State<br>OR | Zip Code<br>97411                            | Transaction ID : SA11AI.71861                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Amount of Each Receipt this Period<br>35.00  |                                                            |  |
| Name of Employer<br>RETIRED                                                                                                                     |             | Occupation<br>RETIRED                        |                                                            |  |
| Receipt For: 2026<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>210.00           |                                                            |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>TOTH, LES, , MR,<br>Mailing Address 2700 NW PINEHURST DR                                   |             |                                              | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>07 / 07 / 2025 |  |
| City<br>MCMINNVILLE                                                                                                                             | State<br>OR | Zip Code<br>97128                            | Transaction ID : SA11AI.69890                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Amount of Each Receipt this Period<br>300.00 |                                                            |  |
| Name of Employer<br>RETIRED                                                                                                                     |             | Occupation<br>RETIRED                        |                                                            |  |
| Receipt For: 2026<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>300.00           |                                                            |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>VESTER-HAWTHORNE, CLAUDIA, S, MAJ, USA RET<br>Mailing Address 39 VALLEY DR                 |             |                                              | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>08 / 04 / 2025 |  |
| City<br>ANNVILLE                                                                                                                                | State<br>PA | Zip Code<br>17003                            | Transaction ID : SA11AI.68566                              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Amount of Each Receipt this Period<br>70.00  |                                                            |  |
| Name of Employer<br>U S ARMY                                                                                                                    |             | Occupation<br>RETIRED U S ARMY               |                                                            |  |
| Receipt For: 2026<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>240.00           |                                                            |  |
| <b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶                                                                                         |             |                                              | 405.00                                                     |  |
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

VESTER-HAWTHORNE, CLAUDIA, S, MAJ, USA RET

**A.**

Mailing Address 39 VALLEY DR

City

ANNVILLE

State

PA

Zip Code

17003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

U S ARMY

Occupation

RETIRED U S ARMY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

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

Transaction ID : SA11AI.71417

Amount of Each Receipt this Period

70.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

VOGELEY, LONA, E, MRS,

Mailing Address 1510 KING DR

City

DUNEDIN

State

FL

Zip Code

34698

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11AI.72193

Amount of Each Receipt this Period

35.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

WALL, IRENE, B, MRS,

Mailing Address 119 SHAWNEE TRL

City

PRUDENVILLE

State

MI

Zip Code

48651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID : SA11AI.70771

Amount of Each Receipt this Period

250.00



Memo Item

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

355.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 86 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WALL, IRENE, B, MRS,

**A.** Mailing Address 119 SHAWNEE TRL

City

PRUDENVILLE

State

MI

Zip Code

48651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 21 2025

Transaction ID : SA11AI.70773

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALL, IRENE, B, MRS,

**B.** Mailing Address 119 SHAWNEE TRL

City

PRUDENVILLE

State

MI

Zip Code

48651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

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

Transaction ID : SA11AI.70772

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALL, IRENE, B, MRS,

**C.** Mailing Address 119 SHAWNEE TRL

City

PRUDENVILLE

State

MI

Zip Code

48651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

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

Transaction ID : SA11AI.69263

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

450.00

**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 87 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WALL, IRENE, B, MRS,

**A.** Mailing Address 119 SHAWNEE TRL

City

PRUDENVILLE

State

MI

Zip Code

48651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 25 / 2025D D / Y Y Y Y Y  
25 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.69264

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALL, IRENE, B, MRS,

**B.** Mailing Address 119 SHAWNEE TRL

City

PRUDENVILLE

State

MI

Zip Code

48651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1650.00

Date of Receipt

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

Transaction ID : SA11AI.71995

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALL, STEPHEN, A, MR,

**C.** Mailing Address 5121 E CONANT ST

City

LONG BEACH

State

CA

Zip Code

90808

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2025D D / Y Y Y Y Y  
01 / 2025Y Y Y Y Y  
2025

Transaction ID : SA11AI.70123

Amount of Each Receipt this Period

100.00

☐ Memo Item

600.00

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

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

PAGE 88 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WARD, NORMAN, , MR, III

**A.** Mailing Address 202 ROCK LAKE DR

City

ZELIENOPLE

State

PA

Zip Code

16063

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.69565

Amount of Each Receipt this Period

150.00



Memo Item

Full Name (Last, First, Middle Initial)

WARNOCK, JOHN, D, MR,

**B.** Mailing Address 18230 WARDS FERRY RD

City

SONORA

State

CA

Zip Code

95370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.68712

Amount of Each Receipt this Period

100.00



Memo Item

Full Name (Last, First, Middle Initial)

WARNOCK, JOHN, D, MR,

**C.** Mailing Address 18230 WARDS FERRY RD

City

SONORA

State

CA

Zip Code

95370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 29 / 2025

Transaction ID : SA11AI.68713

Amount of Each Receipt this Period

50.00



Memo Item

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

300.00

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

PAGE 89 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WARNOCK, JOHN, D, MR,

**A.** Mailing Address 18230 WARDS FERRY RDCity  
SONORAState  
CAZip Code  
95370FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID : SA11AI.71532

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WATTS, ELAINE, C, ,

**B.** Mailing Address 165 NOVA CIRCity  
ALPINEState  
ALZip Code  
35014FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

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

Transaction ID : SA11AI.71639

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WATTS, ELAINE, C, ,

**C.** Mailing Address 165 NOVA CIRCity  
ALPINEState  
ALZip Code  
35014FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 12 2025

Transaction ID : SA11AI.71638

Amount of Each Receipt this Period

40.00

☐ Memo Item

130.00

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

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

PAGE 90 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WEINSTEIN, IRA, , ,

**A.**

Mailing Address 1314 LAS OLAS BLVD.

SUITE 88

City

FT. LAUDERDALE

State

FL

Zip Code

33301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 13 2025

Transaction ID : SA11AI.72306

Amount of Each Receipt this Period

2500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

WHEATLEY, BRADY, L, MR,

Mailing Address 6758 SW COUNTY ROAD 1007

City

RICH HILL

State

MO

Zip Code

64779

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

FARMER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 01 2025

Transaction ID : SA11AI.70602

Amount of Each Receipt this Period

25.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

WHEATLEY, BRADY, L, MR,

Mailing Address 6758 SW COUNTY ROAD 1007

City

RICH HILL

State

MO

Zip Code

64779

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

FARMER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 08 2025

Transaction ID : SA11AI.71897

Amount of Each Receipt this Period

25.00

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

2550.00

**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 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WHEATLEY, BRADY, L, MR,

**A.** Mailing Address 6758 SW COUNTY ROAD 1007City  
RICH HILLState  
MOZip Code  
64779FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
FARMER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 23 2025

Transaction ID : SA11AI.71896

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITE, LUELLA, M, MRS,

**B.** Mailing Address 1603 113TH ST SCity  
TACOMAState  
WAZip Code  
98444FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 03 2025

Transaction ID : SA11AI.71605

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITE, LUELLA, M, MRS,

**C.** Mailing Address 1603 113TH ST SCity  
TACOMAState  
WAZip Code  
98444FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 24 2025

Transaction ID : SA11AI.71604

Amount of Each Receipt this Period

35.00

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

110.00

**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 92 OF 120

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

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

NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WHITE, WILLIAM, I, MR,

**A.** Mailing Address 478 WHITE RD

City

JACKSON

State

OH

Zip Code

45640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.71986

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITMORE, GEORGE, , MR,

**B.** Mailing Address 4516 SE 34TH PL

City

OCALA

State

FL

Zip Code

34480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.70228

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITMORE, GEORGE, , MR,

**C.** Mailing Address 4516 SE 34TH PL

City

OCALA

State

FL

Zip Code

34480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 |   | 0 | 1 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.68902

Amount of Each Receipt this Period

100.00

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

300.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 93 OF 120

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WHITMORE, GEORGE, , MR,

**A.**

Mailing Address 4516 SE 34TH PL

City

OCALA

State

FL

Zip Code

34480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID : SA11AI.68901

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITMORE, GEORGE, , MR,

**B.**

Mailing Address 4516 SE 34TH PL

City

OCALA

State

FL

Zip Code

34480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 25 2025

Transaction ID : SA11AI.68903

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHITMORE, GEORGE, , MR,

**C.**

Mailing Address 4516 SE 34TH PL

City

OCALA

State

FL

Zip Code

34480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 08 2025

Transaction ID : SA11AI.71688

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

250.00

**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 94 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WHITMORE, GEORGE, , MR,

**A.**

Mailing Address 4516 SE 34TH PL

City

OCALA

State

FL

Zip Code

34480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 25 2025

Transaction ID : SA11AI.71687

Amount of Each Receipt this Period

50.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

WILLIAMS, MICHAEL, R, MR,

Mailing Address 200 W CROSS ST

City

DONGOLA

State

IL

Zip Code

62926

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.70453

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

WILLIAMS, MICHAEL, R, MR,

Mailing Address 200 W CROSS ST

City

DONGOLA

State

IL

Zip Code

62926

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11AI.69046

Amount of Each Receipt this Period

100.00

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

250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WILLIAMS, MICHAEL, R, MR,

**A.** Mailing Address 200 W CROSS ST

City  
DONGOLA

State  
IL

Zip Code  
62926

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 22 2025

Transaction ID : SA11AI.69047

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WILLIAMS, MICHAEL, R, MR,

**B.** Mailing Address 200 W CROSS ST

City  
DONGOLA

State  
IL

Zip Code  
62926

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 23 2025

Transaction ID : SA11AI.72303

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WINFREE, JAMES, HAMILTON, MR,

**C.** Mailing Address 354 BAKER ST

City  
KILGORE

State  
TX

Zip Code  
75662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
TREE FARMER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.69372

Amount of Each Receipt this Period

350.00

☐ Memo Item

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

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

485.00

**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 96 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WOODRIF, PIER, , ,

**A.**

Mailing Address PO BOX 503

City

SOMERSET

State

VA

Zip Code

22972

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 03 2025

Transaction ID : SA11AI.69918

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WOODRIF, PIER, , ,

**B.**

Mailing Address PO BOX 503

City

SOMERSET

State

VA

Zip Code

22972

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 25 2025

Transaction ID : SA11AI.68626

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Yoder, Elbez, A, ,

**C.**

Mailing Address 802 Campcreek PI

City

Rock Hill

State

SC

Zip Code

29730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 01 2025

Transaction ID : SA11AI.69810

Amount of Each Receipt this Period

50.00

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

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)

PAGE 97 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Yoder, Elbez, A, ,

**A.**

Mailing Address 802 Campcreek PI

City

Rock Hill

State

SC

Zip Code

29730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

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

Transaction ID : SA11AI.68551

Amount of Each Receipt this Period

30.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Yoder, Elbez, A, ,

Mailing Address 802 Campcreek PI

City

Rock Hill

State

SC

Zip Code

29730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

265.00

Date of Receipt

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

Transaction ID : SA11AI.71398

Amount of Each Receipt this Period

20.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

YODER, M, DAVID, MR,

Mailing Address 33102 JAN CIR

City

MENIFEE

State

CA

Zip Code

92584

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

GRAIN FARMER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

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

Transaction ID : SA11AI.68992

Amount of Each Receipt this Period

100.00



Memo Item

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

150.00

**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 98 OF 120

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**JOE KAUFMAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ZICK, ALFORD, E, MR, JR

**A.**

Mailing Address 11 ROLLING HILLS DR

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

335.00

Date of Receipt

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

Transaction ID : SA11AI.68602

Amount of Each Receipt this Period

50.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

ZICK, ALFORD, E, MR, JR

Mailing Address 11 ROLLING HILLS DR

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

385.00

Date of Receipt

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

Transaction ID : SA11AI.71465

Amount of Each Receipt this Period

50.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

ZICK, ALFORD, E, MR, JR

Mailing Address 11 ROLLING HILLS DR

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

435.00

Date of Receipt

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

Transaction ID : SA11AI.71466

Amount of Each Receipt this Period

50.00



Memo Item

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

150.00

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

51386.00

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

PAGE 99 OF 120

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63372

JOE KAUFMAN FOR CONGRESS

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

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

BASE CONNECT, INC.

Mailing Address

1155 - 15TH ST, NW  
SUITE 410

City

WASHINGTON

State

DC

ZIP Code

20005

☐ Personal Funds of the Candidate

Original Amount of Loan

20235.44

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20235.44

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

20235.44

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

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

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

PAGE 100 OF 120

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63375

JOE KAUFMAN FOR CONGRESS

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

Election: 2014

CENTURY DATA SYSTEMS CORP

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1155 - 15TH STREET, NW

City

WASHINGTON

State

DC

ZIP Code

20005

☐ Personal Funds of the Candidate

Original Amount of Loan

6552.89

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6552.89

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6552.89

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

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

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

PAGE 101 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☐ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63377

JOE KAUFMAN FOR CONGRESS

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

Election: 2014

DIRECT MAIL PROCESSORS, INC.

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1150 CONRAD COURT

City

HAGERSTOWN

State

MD

ZIP Code

21740

☐ Personal Funds of the Candidate

Original Amount of Loan

102.55

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

102.55

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

102.55

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

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

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

PAGE 102 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☐ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63373

JOE KAUFMAN FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

☐ Memo Item

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

INTEGRAM

Mailing Address

22695 Commerce Center Court

City

Dulles

State

VA

ZIP Code

20166

☐ Personal Funds of the Candidate

Original Amount of Loan

10210.45

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10210.45

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

10210.45

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

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

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

PAGE 103 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☐ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63376

JOE KAUFMAN FOR CONGRESS

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

LEGACY LISTS, INC. - BROKERAGE

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1155 - 15TH STREET, NW  
SUITE 410

City

WASHINGTON

State

DC

ZIP Code

20005

☐ Personal Funds of the Candidate

Original Amount of Loan

6327.81

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6327.81

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

☐ % (apr)☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6327.81

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

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

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

PAGE 104 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☐ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63374

JOE KAUFMAN FOR CONGRESS

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

Election: 2014

LEGACY LISTS, INC. - MANAGEMENT

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1155 15th St NW

City

Washington

State

FL

ZIP Code

20005

☐ Personal Funds of the Candidate

Original Amount of Loan

6769.75

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6769.75

**TERMS**

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6769.75

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

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

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

PAGE 105 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☐ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/9.63378

JOE KAUFMAN FOR CONGRESS

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

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

SIMPKINS ESCROW LLC

Mailing Address

29243 St Just Dr

City

UNIONVILLE

State

VA

ZIP Code

22567

☐ Personal Funds of the Candidate

Original Amount of Loan

93.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

93.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 29 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

93.00

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

50291.89

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

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

PAGE 106 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.48978

JOE KAUFMAN FOR CONGRESS

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

Election: 2014

JOE KAUFMAN FOR CONGRESS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE STE 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
04 24 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2000.00

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

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

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

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.48979

JOE KAUFMAN FOR CONGRESS

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

JOE KAUFMAN FOR CONGRESS

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE STE 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

11000.00

Cumulative Payment To Date

9500.00

Balance Outstanding at Close of This Period

1500.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
04 30 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1500.00

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

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

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

PAGE 108 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5512

JOE KAUFMAN FOR CONGRESS

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

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE  
STE 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

3248.21

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3248.21

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
07 01 / 2011

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

3248.21

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

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

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

PAGE 109 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.9126

JOE KAUFMAN FOR CONGRESS

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

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

2645 EXECUTIVE PARK DRIVE  
STE 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

3800.00

Balance Outstanding at Close of This Period

1200.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
12 31 / 2011

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1200.00

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

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

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

PAGE 110 OF 120

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.20680

JOE KAUFMAN FOR CONGRESS

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

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
06 20 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

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

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

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

PAGE 111 OF 120

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.22542

JOE KAUFMAN FOR CONGRESS

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

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
07 05 / 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

500.00

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

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

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

PAGE 112 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.22543

JOE KAUFMAN FOR CONGRESS

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

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
07 13 / 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5000.00

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

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

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

PAGE 113 OF 120

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.22544

JOE KAUFMAN FOR CONGRESS

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

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
07 / 16 / 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1000.00

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

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

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

PAGE 114 OF 120

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.26611

JOE KAUFMAN FOR CONGRESS

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

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

3200.00

Cumulative Payment To Date

823.50

Balance Outstanding at Close of This Period

2376.50

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
08 15 / 2012

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2376.50

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

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

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

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.50920

JOE KAUFMAN FOR CONGRESS

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

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
08 20 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6000.00

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

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

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

PAGE 116 OF 120

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.50921

JOE KAUFMAN FOR CONGRESS

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

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

KAUFMAN, JOE, , ,

Mailing Address

2645 EXECUTIVE PARK DRIVE # 512

City

WESTON

State

FL

ZIP Code

33331

☒ Personal Funds of the Candidate

Original Amount of Loan

6000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
08 20 / 2014

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

Upon Demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

6000.00

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

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

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

PAGE 117 OF 120

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.58526

JOE KAUFMAN FOR CONGRESS

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

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Kaufman, Joseph, , ,

Mailing Address

8708 NW 82 ST.

City

Tamarac

State

FL

ZIP Code

33321

☒ Personal Funds of the Candidate

Original Amount of Loan

5745.93

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5745.93

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
03 / 05 / 2015

M M / D D / Y Y Y Y

on demand

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5745.93

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

39570.64

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

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

PAGE 118 OF 120

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

NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

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

**BASE CONNECT, INC.**

Nature of Debt (Purpose):

Direct Mail Creative Fees

Mailing Address 1155 15th St NW  
STE 410City  
WashingtonState  
DCZip Code  
20005

Outstanding Balance Beginning This Period

20235.44

Transaction ID : SD10.33907

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20235.44

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

**CENTURY DATA SYSTEMS CORP**

Nature of Debt (Purpose):

Direct Mail Program Postage

Mailing Address 1155 - 15TH STREET, NW

City  
WASHINGTONState  
DCZip Code  
20005

Outstanding Balance Beginning This Period

6552.89

Transaction ID : SD10.33908

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6552.89

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

**DIRECT MAIL PROCESSORS, INC.**

Nature of Debt (Purpose):

Direct Mail Program Postage

Mailing Address 2976 Penwick Lane

City  
DunkirkState  
MDZip Code  
20754

Outstanding Balance Beginning This Period

102.55

Transaction ID : SD10.33909

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

102.55

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

26890.88

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

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

PAGE 119 OF 120

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

NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

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

**INTEGRAM**

Nature of Debt (Purpose):

Direct Mail Program Printing &amp; Mailshop

Mailing Address 22695 Commerce Center Court

City  
DullesState  
VAZip Code  
20166

Outstanding Balance Beginning This Period

10210.45

Transaction ID : SD10.33910

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10210.45

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

**LEGACY LISTS, INC. - BROKERAGE**

Nature of Debt (Purpose):

Direct Mail List Rental

Mailing Address 1155 - 15TH STREET, NW  
SUITE 410City  
WASHINGTONState  
DCZip Code  
20005

Outstanding Balance Beginning This Period

6327.81

Transaction ID : SD10.33911

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6327.81

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

**LEGACY LISTS, INC. - MANAGEMENT**

Nature of Debt (Purpose):

Direct Mail List Management

Mailing Address 1155 15th St NW

City  
WashingtonState  
FLZip Code  
20005

Outstanding Balance Beginning This Period

6769.75

Transaction ID : SD10.33912

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6769.75

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

23308.01

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

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

PAGE 120 OF 120

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

NAME OF COMMITTEE (In Full)

**JOE KAUFMAN FOR CONGRESS**

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

**SIMPKINS ESCROW LLC**

Nature of Debt (Purpose):

Indirect Prog Exp Caging &amp; Escrow

Mailing Address 29243 St Just Dr

City

UNIONVILLE

State

VA

Zip Code

22567

Outstanding Balance Beginning This Period

93.00

Transaction ID : SD10.33913

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

93.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

93.00

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

50291.89

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

39570.64

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

89862.53