



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Ashley Bell for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	4306.00	6261.50
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	4306.00	6261.50
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	5685.84	6443.33
(b) Total Offsets to Operating Expenditures (from Line 14) .....	1773.75	1773.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	3912.09	4669.58
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>		
	1672.84	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>		
	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>		
	0.00	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**Ashley Bell for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	525.00	480.00
(ii) Unitemized .....	3031.00	4319.00
(iii) TOTAL of contributions from individuals .....	3556.00	4799.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate .....	750.00	1462.50
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	4306.00	6261.50
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	1773.75	1773.75
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	80.92	80.92
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....</b>	6160.67	8116.17

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5685.84	6443.33
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	5685.84	6443.33

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1198.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6160.67
25. SUBTOTAL (add Line 23 and Line 24).....	7358.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5685.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1672.84

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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

NAME OF COMMITTEE (In Full)  
**Ashley Bell for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Ketterman, Terri, , ,

Mailing Address 2925 Woodfield Ln

City: Lincolnton      State: NC      Zip Code: 28092

FEC ID number of contributing federal political committee: C

Name of Employer: Wells Fargo      Occupation: Executive

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 / 03 / 2025

**Transaction ID : A-46**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 2925 Woodfield Ln

City: Lincolnton      State: NC      Zip Code: 28092

FEC ID number of contributing federal political committee: C

Name of Employer: Wells Fargo      Occupation: Executive

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 Y  
07 / 13 / 2025

**Transaction ID : A-69**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 430 Camp Creek Rd

City: Iron Station      State: NC      Zip Code: 28080

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  
09 / 27 / 2025

**Transaction ID : A-173**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525.00
<b>TOTAL</b> This Period (last page this line number only).....▶	525.00

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

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NAME OF COMMITTEE (In Full)  
**Ashley Bell for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Bell, Ashley, , ,

Mailing Address 550 Liberty street  
Suite 168

City Winston Salem State NC Zip Code 27101

FEC ID number of contributing federal political committee. **C** H6NC10174

Name of Employer Medical University of South Carolina Occupation Physician Associate

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1087.50

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 02 / 2025

**Transaction ID : A-160**

Amount of Each Receipt this Period  
375.00

Memo Item  
IN KIND: Compliance Services Invoice

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

Mailing Address 550 Liberty street  
Suite 168

City Winston Salem State NC Zip Code 27101

FEC ID number of contributing federal political committee. **C** H6NC10174

Name of Employer Medical University of South Carolina Occupation Physician Associate

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1462.50

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

**Transaction ID : A-162**

Amount of Each Receipt this Period  
375.00

Memo Item  
IN KIND: Compliance Services Invoice

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	750.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 11  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Ashley Bell for Congress**

**A.** Full Name (Last, First, Middle Initial)  
NGP Van Inc

Mailing Address 655 15th Street Northwest  
#650

City Washington State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
0.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 05 2025

**Transaction ID : A-157**

Amount of Each Receipt this Period  
1773.75

Memo Item  
Vendor Investment, Lists (Refund)

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1773.75
<b>TOTAL</b> This Period (last page this line number only).....▶	1773.75

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ashley Bell for Congress**

**A. Ashley Bell for Congress**

Full Name (Last, First, Middle Initial)  
Ashley Bell for Congress

Mailing Address 4887 County Home Road  
APT. D2

City Conover State NC Zip Code 28613

Purpose of Disbursement Transfer to new Treasurer Account Category/Type 001

Candidate Name Ashley Bell for Congress

Office Sought:  House  Senate  President Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement 09 / 29 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 1055.42

Transaction ID : B-176

Memo Item

**B. Bell, Ashley, , ,**

Full Name (Last, First, Middle Initial)  
Bell, Ashley, , ,

Mailing Address 550 Liberty street  
Suite 168

City Winston Salem State NC Zip Code 27101

Purpose of Disbursement IN KIND: Compliance Services Invoice Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement 07 / 02 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 375.00

Transaction ID : B-160

Memo Item

**C. Bell, Ashley, , ,**

Full Name (Last, First, Middle Initial)  
Bell, Ashley, , ,

Mailing Address 550 Liberty street  
Suite 168

City Winston Salem State NC Zip Code 27101

Purpose of Disbursement IN KIND: Compliance Services Invoice Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement 08 / 01 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 375.00

Transaction ID : B-162

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 750.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Ashley Bell for Congress**

Full Name (Last, First, Middle Initial)

**A. Lower West Terrace LLC**

Mailing Address 5501 Merchants View Square  
PMB 103

City Haymarket State VA Zip Code 20169

Purpose of Disbursement Speaking Fees for Forum Guest  Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 07 / 29 / 2025

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : B-155

Memo Item

Full Name (Last, First, Middle Initial)

**B. NGP Van Inc**

Mailing Address 655 15th Street Northwest  
#650

City Washington State DC Zip Code 20005

Purpose of Disbursement Vendor Investment, Lists  Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 08 / 04 / 2025

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : B-156

Memo Item

Full Name (Last, First, Middle Initial)

**C. Numero, Inc.**

Mailing Address 695 Town Center Drive  
Suite 1100

City Costa Mesa State CA Zip Code 92626

Purpose of Disbursement Credit Card Processing Fees  Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2026  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 09 / 23 / 2025

FEC Identification Number

Amount of Each Disbursement this Period

Transaction ID : B-192

Memo Item

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ashley Bell for Congress**

Full Name (Last, First, Middle Initial) <b>A. Numero, Inc.</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2025
Mailing Address 695 Town Center Drive Suite 1100		FEC Identification Number C
City Costa Mesa	State CA	Zip Code 92626
Purpose of Disbursement Credit Card Processing Fees		001
Candidate Name		Amount of Each Disbursement this Period 8.26
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-193 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Slay Strategies LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2025
Mailing Address 424 Potts Street		FEC Identification Number C
City Davidson	State NC	Zip Code 28036
Purpose of Disbursement Media Investment		001
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-154 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sunrise Political Solutions, Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2025
Mailing Address PO Box 1004		FEC Identification Number C
City La Mesa	State CA	Zip Code 91944
Purpose of Disbursement IN KIND: Compliance Services		
Candidate Name		Amount of Each Disbursement this Period 375.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-161 <input checked="" type="checkbox"/> Memo Item MEMO: Subvendor of-Ashley Bell
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	508.26
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Ashley Bell for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sunrise Political Solutions, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2025
Mailing Address PO Box 1004		FEC Identification Number C
City La Mesa	State CA	Zip Code 91944
Purpose of Disbursement IN KIND: Compliance Services		Amount of Each Disbursement this Period 375.00
Candidate Name		Transaction ID : B-163
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item MEMO: Subvendor of-Ashley Bell
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. Sunrise Political Solutions, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2025
Mailing Address PO Box 1004		FEC Identification Number C
City La Mesa	State CA	Zip Code 91944
Purpose of Disbursement Compliance Services		Amount of Each Disbursement this Period 375.00
Candidate Name		Transaction ID : B-166
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type 001	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Transaction ID
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	375.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5410.76