

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Cody K 4 Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2025 To: M M / D D / Y Y Y Y 12 / 31 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	83374.82	216633.58
(b) Total Contribution Refunds (from Line 20(d))	500.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	82874.82	216133.58
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	52179.22	100690.04
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	52179.22	100690.04
8. Cash on Hand at Close of Reporting Period (from Line 27)	206186.95	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	144994.41	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Cody K 4 Congress

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

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).....	60567.00	180317.00
(ii) Unitemized.....	22807.82	27697.70
(iii) TOTAL of contributions from individuals ▶	83374.82	208014.70
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3500.00
(d) The Candidate.....	0.00	5118.88
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	83374.82	216633.58
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	100000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	100000.00
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)..... ▶	83374.82	316633.58

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.....	52179.22	100690.04
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	500.00	500.00
(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)).....	500.00	500.00
21. OTHER DISBURSEMENTS	9014.59	9256.59
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	61693.81	110446.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	184505.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	83374.82
25. SUBTOTAL (add Line 23 and Line 24).....	267880.76
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	61693.81
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	206186.95

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 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Arnold, Daniel, C, ,

Mailing Address 310 S Commercial St

City Emporia State Zip Code KS 66801

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

Name of Employer Emporia State University Occupation Custodial Specialist

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
11 / 25 / 2025

Transaction ID : A-697

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 9273 Tournament Canyon Drive

City Las Vegas State NV Zip Code 89144

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 Y Y
11 / 28 / 2025

Transaction ID : A-501

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Bieber, Albert, G, ,

Mailing Address PO Box 207

City China State TX Zip Code 77613

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

Name of Employer None Occupation None

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
12 / 15 / 2025

Transaction ID : A-1082

Amount of Each Receipt this Period
350.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1650.00

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 6 OF 50	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Black, Tisha, , ,

Mailing Address 10777 West Twain

City Las Vegas	State NV	Zip Code 89135
-------------------	-------------	-------------------

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

Name of Employer Black & Wadhams	Occupation Partner
-------------------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2025

Transaction ID : A-266

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 7485 Buckskin Ave

City Las Vegas	State NV	Zip Code 89129
-------------------	-------------	-------------------

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

Name of Employer Ramm Corp	Occupation Construction
-------------------------------	----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2025

Transaction ID : A-446

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 7485 Buckskin Ave

City Las Vegas	State NV	Zip Code 89129
-------------------	-------------	-------------------

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

Name of Employer Ramm Corp	Occupation Construction
-------------------------------	----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2025

Transaction ID : A-487

Amount of Each Receipt this Period
3000.00

Memo Item

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

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

4000.00

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 7 OF 50	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Bucher, Steve, , ,

Mailing Address 7558 Burnham

City Las Vegas	State NV	Zip Code 89123
-------------------	-------------	-------------------

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

Name of Employer Nevada Contract Carpet	Occupation Management
--	--------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2025 2026 2027 2028 2029 2030 2031 2032 2033 2034 2035 2036 2037 2038 2039 2040

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2025

Transaction ID : A-442

Amount of Each Receipt this Period
 0.00 75.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CC Construction of Nevada LLC

Mailing Address 5850 West Desert Inn Road

City Las Vegas	State NV	Zip Code 89146
-------------------	-------------	-------------------

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

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2025 2026 2027 2028 2029 2030 2031 2032 2033 2034 2035 2036 2037 2038 2039 2040

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 15 / 2025

Transaction ID : A-525

Amount of Each Receipt this Period
 0.00 1000.00

Memo Item

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

Mailing Address 5900 Paseo del Mar

City Las Vegas	State NV	Zip Code 89108
-------------------	-------------	-------------------

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

Name of Employer Werdco BC, Inc.	Occupation Operations Manager
-------------------------------------	----------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 2025 2026 2027 2028 2029 2030 2031 2032 2033 2034 2035 2036 2037 2038 2039 2040

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2025

Transaction ID : A-459

Amount of Each Receipt this Period
 0.00 3500.00

Memo Item

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

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

0.00 4575.00

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 50
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Conrad, Brenton, , ,

Mailing Address 4660 Flippin St

City Las Vegas	State NV	Zip Code 89115
-------------------	-------------	-------------------

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

Name of Employer Werdco BC Inc	Occupation Manager
-----------------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 16 / 2025

Transaction ID : A-437

Amount of Each Receipt this Period
3500.00

Memo Item

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

Mailing Address 5336 Elkhorn Rd

City Las Vegas	State NV	Zip Code 89131
-------------------	-------------	-------------------

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

Name of Employer Werdco BC, Inc.	Occupation HR Manager
-------------------------------------	--------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 16 / 2025

Transaction ID : A-436

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 5336 Elkhorn Rd

City Las Vegas	State NV	Zip Code 89131
-------------------	-------------	-------------------

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

Name of Employer Werdco BC, Inc.	Occupation HR Manager
-------------------------------------	--------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 16 / 2025

Transaction ID : A-439

Amount of Each Receipt this Period
1500.00

Memo Item

Redesignation To

SUBTOTAL of Receipts This Page (optional)..... ▶	8500.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 9 OF 50	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Conrad, Stephanie, , ,

Mailing Address 5336 Elkhorn Rd

City Las Vegas	State NV	Zip Code 89131
-------------------	-------------	-------------------

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

Name of Employer Werdco BC, Inc.	Occupation HR Manager
-------------------------------------	--------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 16 / 2025

Transaction ID : A-440

Amount of Each Receipt this Period
- 1500.00

Memo Item

Redesignation From

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

Mailing Address 10944 Fishers Island

City Las Vegas	State NV	Zip Code 89141
-------------------	-------------	-------------------

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

Name of Employer Silver Lake Construction	Occupation Vice President
--	------------------------------

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
11 / 17 / 2025

Transaction ID : A-441

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 1491 Lamplight Village Lane

City Las Vegas	State NV	Zip Code 89183
-------------------	-------------	-------------------

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

Name of Employer Clark County	Occupation Attorney
----------------------------------	------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
282.00

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

Transaction ID : A-512

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 Page

FOR LINE NUMBER: (check only one)		PAGE 10 OF 50	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Cox, Bryan, , ,

Mailing Address 1491 Lamplight Village Lane

City Las Vegas	State NV	Zip Code 89183
-------------------	-------------	-------------------

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

Name of Employer Clark County	Occupation Attorney
----------------------------------	------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
282.00

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

Transaction ID : A-519

Amount of Each Receipt this Period
32.00

Memo Item

Earmark via WinRed on 2025-12-10

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

Mailing Address 4250 Fairfax Dr
Ste 600

City Arlington	State VA	Zip Code 22203
-------------------	-------------	-------------------

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

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
338.70

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2025

Transaction ID : A-519CM

Amount of Each Receipt this Period
32.00

* Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

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

Mailing Address 2973 Kings Dominion Ct.

City Henderson	State NV	Zip Code 89052
-------------------	-------------	-------------------

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

Name of Employer McCarthy Building Co.	Occupation Construction Manager
---	------------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 18 / 2025

Transaction ID : A-460

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	1032.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Dwyer, Vickie, , ,

Mailing Address 1800 Stonehaven Drive

City Las Vegas State NV Zip Code 89108

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
11 / 14 / 2025

Transaction ID : A-422

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1800 Stonehaven Drive

City Las Vegas State NV Zip Code 89108

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 ▼
620.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2025

Transaction ID : A-488

Amount of Each Receipt this Period
120.00

Memo Item

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

Mailing Address 1200 A Street

City Las Vegas State NV Zip Code 89106-3215

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

Name of Employer Ewing Investments Occupation Owner

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
11 / 17 / 2025

Transaction ID : A-491

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3120.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Ewing, Robert, , ,

Mailing Address 9500 Corbett St

City Las Vegas State NV Zip Code 89149

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

Name of Employer Ewing Brothers Occupation Owner

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
11 / 17 / 2025

Transaction ID : A-438

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Ford, John, E, ,

Mailing Address 2250 Hearst Willits Rd

City Willits State CA Zip Code 95490

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

Name of Employer Self Employed Occupation Farmer

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
12 / 01 / 2025

Transaction ID : A-804

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Gaughan, Michael, J, , III

Mailing Address 9908 Sparrow Hawk Court

City Las Vegas State NV Zip Code 89134

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

Name of Employer South Point Hotel Occupation Casino Owner

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
11 / 28 / 2025

Transaction ID : A-502

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Gentis, Cindy, , ,

Mailing Address 1009 Golden Ridge Ct

City Henderson State NV Zip Code 89052

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

Name of Employer Xentegra LLC Occupation Senior Technical It Project Manager

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 Y
11 / 16 / 2025

Transaction ID : A-433

Amount of Each Receipt this Period
240.00

Memo Item

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

Mailing Address 489 Paso de Montana St

City Las Vegas State NV Zip Code 89138

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

Name of Employer Self Employed 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 Y Y
11 / 17 / 2025

Transaction ID : A-447

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address Po Box 358

City Alamo State NV Zip Code 89001

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

Name of Employer Holton Truck Line Inc. Occupation President

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2025

Transaction ID : A-451

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2240.00

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 14 OF 50	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Jakobiak, Chris, , ,

Mailing Address 8416 Shady Pines Dr

City Las Vegas	State NV	Zip Code 89131
-------------------	-------------	-------------------

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

Name of Employer Jakobiak Concrete, Inc	Occupation Owner
--	---------------------

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
 11 / 17 / 2025

Transaction ID : A-450

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 7712 Sea Cliff Way

City Las Vegas	State NV	Zip Code 89128
-------------------	-------------	-------------------

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

Name of Employer Kelleher Davis Contracting LLC	Occupation Managing Member
--	-------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

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

Transaction ID : A-392

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 7712 Sea Cliff Way

City Las Vegas	State NV	Zip Code 89128
-------------------	-------------	-------------------

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

Name of Employer Kelleher Davis Contracting LLC	Occupation Managing Member
--	-------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2025

Transaction ID : A-425

Amount of Each Receipt this Period
300.00

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 Page

FOR LINE NUMBER: PAGE 15 OF 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Koenig, Mark, A, ,

Mailing Address 1013 Windfair Village Street

City Las Vegas State NV Zip Code 89145

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

Name of Employer Powerhouse Batting Cage Occupation Many

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2025

Transaction ID : A-737

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 7326 W Cheyenne Suite #120

City Las Vegas State NV Zip Code 89129

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

Name of Employer BM Highland LLC Occupation Owner

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 10 / 2025

Transaction ID : A-408

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 3084 S Highland Dr

City Las Vegas State NV Zip Code 89109

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

Name of Employer JBM Underground Occupation President

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2025

Transaction ID : A-445

Amount of Each Receipt this Period
500.00

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 OF 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
May, Clarence Marvin, , ,

Mailing Address 1198 Macdonald Ranch Drive

City Henderson State NV Zip Code 89012

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 ▼
3500.00

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

Transaction ID : A-520

Amount of Each Receipt this Period
3500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
McRae, Cameron, L, ,

Mailing Address 570 Lupin Street

City Pahrump State NV Zip Code 89048

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
12 / 31 / 2025

Transaction ID : A-761

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Melvin, Doris, P, ,

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 ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 04 / 2025

Transaction ID : A-959

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Middagh, James, , ,

Mailing Address 457 Raven Way

City Mesquite State NV Zip Code 89027

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

Name of Employer Retired Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 25 / 2025

Transaction ID : A-369

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 457 Raven Way

City Mesquite State NV Zip Code 89027

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 ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2025

Transaction ID : A-381

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 5857 Bargull Bay Ave

City Las Vegas State NV Zip Code 89131

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 ▼
620.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2025

Transaction ID : A-753

Amount of Each Receipt this Period
500.00

Memo Item

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

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

2000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Polhamus, Boyd, , ,

Mailing Address 18749 Icebox Road

City Sparta State WI Zip Code 54656

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

Name of Employer Self Employed Occupation Voice Artist

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
11 / 24 / 2025

Transaction ID : A-472

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 4016 Turquoise Falls Street

City Las Vegas State NV Zip Code 89129

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

Name of Employer Martin Harris Construction Occupation Vice President

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
12 / 17 / 2025

Transaction ID : A-530

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Primak, Stephen, H, ,

Mailing Address 8621 Glenmount Drive

City Las Vegas State NV Zip Code 89134

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

Name of Employer Self Employed 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
11 / 17 / 2025

Transaction ID : A-489

Amount of Each Receipt this Period
500.00

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 OF 50
(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)
Cody K 4 Congress

A. 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: Pencov Service Ind. Occupation: Executive

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 21 / 2025

Transaction ID : A-674

Amount of Each Receipt this Period: 500.00

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: Pencov Service Ind. Occupation: Executive

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 12 / 02 / 2025

Transaction ID : A-1081

Amount of Each Receipt this Period: 250.00

Memo Item

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

Mailing Address 1995 S Main St
Suite 901

City: Blacksburg State: VA Zip Code: 24060

FEC ID number of contributing federal political committee: C

Name of Employer: Brandon Semones Insurance Agency Inc Occupation: State Farm Agent

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 04 / 2025

Transaction ID : A-388

Amount of Each Receipt this Period: 250.00

Memo Item

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 20 OF 50	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Sheets, John, , ,

Mailing Address 1146 Cattle Call Lane

City Moneta	State VA	Zip Code 24121
----------------	-------------	-------------------

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

Name of Employer Sheets Enterprises Inc	Occupation Owner
--	---------------------

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
 11 / 14 / 2025

Transaction ID : A-430

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1146 Cattle Call Lane

City Moneta	State VA	Zip Code 24121
----------------	-------------	-------------------

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

Name of Employer Sheets Enterprises Inc	Occupation Owner
--	---------------------

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
 12 / 31 / 2025

Transaction ID : A-752

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1021 Ridge View Dr
518

City Alamo	State NV	Zip Code 89001
---------------	-------------	-------------------

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

Name of Employer M Con Inc	Occupation Owner
-------------------------------	---------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2025

Transaction ID : A-456

Amount of Each Receipt this Period
3500.00

Memo Item

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

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

4100.00

**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 21 OF 50	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Szalay, Joseph, , ,

Mailing Address 5377 Waving Sage Dr

City Las Vegas	State NV	Zip Code 89149
-------------------	-------------	-------------------

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 Y Y
11 / 17 / 2025

Transaction ID : A-452

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 145 Scotts Rd

City Southampton	State NY	Zip Code 11968
---------------------	-------------	-------------------

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 Y
12 / 23 / 2025

Transaction ID : A-1187

Amount of Each Receipt this Period
3500.00

Memo Item

Redesignation To

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

Mailing Address 145 Scotts Rd

City Southampton	State NY	Zip Code 11968
---------------------	-------------	-------------------

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 Y
12 / 23 / 2025

Transaction ID : A-1188

Amount of Each Receipt this Period
- 3500.00

Memo Item

Redesignation From

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 22 OF 50	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Taylor, Margaretta, , ,

Mailing Address 145 Scotts Rd

City Southampton	State NY	Zip Code 11968
---------------------	-------------	-------------------

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 Y
12 / 23 / 2025

Transaction ID : A-927

Amount of Each Receipt this Period
7000.00

Memo Item

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

Mailing Address 601 Proud Eagle Ln

City Las Vegas	State NV	Zip Code 89144
-------------------	-------------	-------------------

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

Name of Employer Jerry and Alona Velarde Family Trust	Occupation Trustee
--	-----------------------

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
12 / 16 / 2025

Transaction ID : A-529

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 8026 Planting Fields Place

City Las Vegas	State NV	Zip Code 89117
-------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Fitness Trainer
-----------------------------------	-------------------------------

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
11 / 28 / 2025

Transaction ID : A-499

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7750.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Whipple, Jane, , ,

Mailing Address 4004 Whipple Ranch Road

City Hiko State NV Zip Code 89017

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 ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2025

Transaction ID : A-524

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Yoder, Mahlon, David, ,

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 Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2025

Transaction ID : A-1080

Amount of Each Receipt this Period
6000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Yoder, Mahlon, David, ,

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 Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2025

Transaction ID : A-1204

Amount of Each Receipt this Period
2500.00

Memo Item

Redesignation To

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 OF 50
(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)
Cody K 4 Congress

A. Full Name (Last, First, Middle Initial)
Yoder, Mahlon, David, ,

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 Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 03 / 2025

Transaction ID : A-1205

Amount of Each Receipt this Period
- 2500.00

Memo Item

Redesignation From

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

Mailing Address 806 Buchanan Blvd.

City Boulder City State NV Zip Code 89005

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
10 / 20 / 2025

Transaction ID : A-344

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	60567.00

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 25 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 100.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-290 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 20.30
Office Sought: <input type="checkbox"/> House <input 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-293 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 4.30
Office Sought: <input type="checkbox"/> House <input 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-295 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	125.30
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees		001
Candidate Name		Amount of Each Disbursement this Period 4.30
Office Sought: <input type="checkbox"/> House <input 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-346 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees		001
Candidate Name		Amount of Each Disbursement this Period 20.30
Office Sought: <input type="checkbox"/> House <input 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-355 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees		001
Candidate Name		Amount of Each Disbursement this Period 6.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-360 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	31.20
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees		001
Candidate Name		Amount of Each Disbursement this Period 7.90
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-366 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees		001
Candidate Name		Amount of Each Disbursement this Period 6.30
Office Sought: <input type="checkbox"/> House <input 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-380 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees		001
Candidate Name		Amount of Each Disbursement this Period 21.00
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-386 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	35.20
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Anedot		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 4.30	
Office Sought: <input type="checkbox"/> House <input 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-411 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 11.00	
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-413 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name	Amount of Each Disbursement this Period 25.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-416 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	40.70
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 29 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Anedot			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025	
Mailing Address 1340 Poydras Street			FEC Identification Number C	
City New Orleans	State LA	Zip Code 70112	Amount of Each Disbursement this Period 46.60	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Transaction ID : B-418	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Anedot			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2025	
Mailing Address 1340 Poydras Street			FEC Identification Number C	
City New Orleans	State LA	Zip Code 70112	Amount of Each Disbursement this Period 37.70	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Transaction ID : B-454	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Anedot			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2025	
Mailing Address 1340 Poydras Street			FEC Identification Number C	
City New Orleans	State LA	Zip Code 70112	Amount of Each Disbursement this Period 606.60	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Transaction ID : B-462	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	690.90
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Anedot		Date of Disbursement MM / DD / YYYY 11 / 20 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 339.80
Office Sought: <input type="checkbox"/> House <input 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-470 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement MM / DD / YYYY 11 / 22 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1.90
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-494 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement MM / DD / YYYY 11 / 26 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 10.30
Office Sought: <input type="checkbox"/> House <input 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-498 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	352.00
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 31 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Anedot		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 0.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-509 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 4.30
Office Sought: <input type="checkbox"/> House <input 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-511 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 12.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-515 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	17.60
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 32 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Anedot		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	001	
Candidate Name	Amount of Each Disbursement this Period 1.10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-528 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	001	
Candidate Name	Amount of Each Disbursement this Period 20.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B-532 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2025
Mailing Address 1340 Poydras Street		FEC Identification Number C
City New Orleans	State LA	Zip Code 70112
Purpose of Disbursement Credit Card Fees	001	
Candidate Name	Amount of Each Disbursement this Period 1.30	
Office Sought: <input type="checkbox"/> House <input 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-537 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	23.00
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 33 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Anedot			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2025	
Mailing Address 1340 Poydras Street			FEC Identification Number C	
City New Orleans	State LA	Zip Code 70112	Amount of Each Disbursement this Period 4.30	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Transaction ID : B-739	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Anedot			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2025	
Mailing Address 1340 Poydras Street			FEC Identification Number C	
City New Orleans	State LA	Zip Code 70112	Amount of Each Disbursement this Period 0.90	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Transaction ID : B-746	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Anedot			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2025	
Mailing Address 1340 Poydras Street			FEC Identification Number C	
City New Orleans	State LA	Zip Code 70112	Amount of Each Disbursement this Period 10.60	
Purpose of Disbursement Credit Card Fees		Category/ Type 001	Transaction ID : B-772	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	15.80
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Bank of America		M M / D D / Y Y Y Y 10 / 29 / 2025	
Mailing Address PO Box 672050		FEC Identification Number	
City Dallas	State TX	Zip Code 75267	C
Purpose of Disbursement Food/Beverage, Photographs, Campaign Supplies and Digital Storage		Category/ Type 001	Amount of Each Disbursement this Period
Candidate Name		2533.21	
Office Sought: <input type="checkbox"/> House <input 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-378	
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Bank of America		M M / D D / Y Y Y Y 12 / 01 / 2025	
Mailing Address PO Box 672050		FEC Identification Number	
City Dallas	State TX	Zip Code 75267	C
Purpose of Disbursement Food/Beverage, Photographs, Campaign Supplies and Digital Storage		Category/ Type 001	Amount of Each Disbursement this Period
Candidate Name		25.00	
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-783	
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Bank of America		M M / D D / Y Y Y Y 12 / 30 / 2025	
Mailing Address PO Box 672050		FEC Identification Number	
City Dallas	State TX	Zip Code 75267	C
Purpose of Disbursement Food/Beverage, Photographs, Campaign Supplies and Digital Storage		Category/ Type 001	Amount of Each Disbursement this Period
Candidate Name		103.00	
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-781	
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	2661.21
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 35 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Benjamin's Buttons		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2025
Mailing Address 12290 Angling Road		FEC Identification Number C
City Edinboro	State PA	Zip Code 16412
Purpose of Disbursement Buttons	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 376.30
Office Sought: <input type="checkbox"/> House <input 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-382 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Gorai, Schayden, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address 3030 Robert Trent Jones Lane		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89141
Purpose of Disbursement Political Director Services	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3000.00
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-267 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Gorai, Schayden, , ,		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2025
Mailing Address 3030 Robert Trent Jones Lane		FEC Identification Number C
City Las Vegas	State NV	Zip Code 89141
Purpose of Disbursement Political Director Services	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3000.00
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-384 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6376.30
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

A. Gorai, Schayden, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 3030 Robert Trent Jones Lane

City Las Vegas State NV Zip Code 89141

Purpose of Disbursement Political Director Services Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 12 / 03 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 3000.00

Transaction ID : B-507

Memo Item

B. Integrated Solutions: Political

Full Name (Last, First, Middle Initial)

Mailing Address 4142 Adams Avenue Suite 103-550

City San Diego State CA Zip Code 92116

Purpose of Disbursement Software Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 10 / 01 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 575.00

Transaction ID : B-271

Memo Item

C. Integrated Solutions: Political

Full Name (Last, First, Middle Initial)

Mailing Address 4142 Adams Avenue Suite 103-550

City San Diego State CA Zip Code 92116

Purpose of Disbursement Software Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 11 / 04 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 575.00

Transaction ID : B-548

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 4150.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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)
Cody K 4 Congress

A. Integrated Solutions: Political

Full Name (Last, First, Middle Initial)

Mailing Address 4142 Adams Avenue
Suite 103-550

City San Diego State CA Zip Code 92116

Purpose of Disbursement Software Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 12 / 01 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 850.00

Transaction ID : B-549

Memo Item

B. K2 Laser Works

Full Name (Last, First, Middle Initial)

Mailing Address 653 Whatley Road

City Nashua State MT Zip Code 59248

Purpose of Disbursement Campaign Supplies Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 10 / 29 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 1713.00

Transaction ID : B-464

Memo Item MEMO: Subvendor of-Bank of America

C. Lloyd, Madison, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 9346 Peace Pipe Court

City Las Vegas State NV Zip Code 89117

Purpose of Disbursement Photographer Category/Type 003

Candidate Name

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

State: District:

Date of Disbursement 11 / 25 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 300.00

Transaction ID : B-492

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 1150.00

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 38 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Lloyd, Madison, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2025	
Mailing Address 9346 Peace Pipe Court			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89117	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Photographer		Category/ Type 003	Transaction ID : B-535	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Monaco, Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025	
Mailing Address 1011 South Linwood Avenue			FEC Identification Number C	
City Santa Ana	State CA	Zip Code 92705	Amount of Each Disbursement this Period 1870.70	
Purpose of Disbursement Postage		Category/ Type 001	Transaction ID : B-341	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Pro Gun Vegas			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025	
Mailing Address PO Box 61241			FEC Identification Number C	
City Boulder City	State NV	Zip Code 89006	Amount of Each Disbursement this Period 946.16	
Purpose of Disbursement Supplies for Event		Category/ Type 001	Transaction ID : B-340	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3316.86
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 50			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. The KAL Group, Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2025		
Mailing Address PO Box 730			FEC Identification Number C		
City Hilmar	State CA	Zip Code 95324	Amount of Each Disbursement this Period 853.72		
Purpose of Disbursement Bookkeeping		Category/ Type 001	Transaction ID : B-373		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. The KAL Group, Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2025		
Mailing Address PO Box 730			FEC Identification Number C		
City Hilmar	State CA	Zip Code 95324	Amount of Each Disbursement this Period 854.38		
Purpose of Disbursement Bookkeeping		Category/ Type 001	Transaction ID : B-374		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. The KAL Group, Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2025		
Mailing Address PO Box 730			FEC Identification Number C		
City Hilmar	State CA	Zip Code 95324	Amount of Each Disbursement this Period 856.94		
Purpose of Disbursement Bookkeeping		Category/ Type 001	Transaction ID : B-419		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2565.04
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. The Rosales Agency			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2025	
Mailing Address PO Box 89			FEC Identification Number C	
City Rescue	State CA	Zip Code 95672	Amount of Each Disbursement this Period 110.00	
Purpose of Disbursement Email Subscription		Category/ Type 001	Transaction ID : B-375	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. The Rosales Agency			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2025	
Mailing Address PO Box 89			FEC Identification Number C	
City Rescue	State CA	Zip Code 95672	Amount of Each Disbursement this Period 193.50	
Purpose of Disbursement Email Subscription		Category/ Type 001	Transaction ID : B-376	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. The Rosales Agency			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2025	
Mailing Address PO Box 89			FEC Identification Number C	
City Rescue	State CA	Zip Code 95672	Amount of Each Disbursement this Period 6398.75	
Purpose of Disbursement Mailing and Postage		Category/ Type 003	Transaction ID : B-391	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	6702.25
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. The Rosales Agency			Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2025	
Mailing Address PO Box 89			FEC Identification Number C	
City Rescue	State CA	Zip Code 95672	Amount of Each Disbursement this Period 628.29	
Purpose of Disbursement Travel, Shipping and Email Subscription		Category/ Type 001	Transaction ID : B-414	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. The Rosales Agency			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025	
Mailing Address PO Box 89			FEC Identification Number C	
City Rescue	State CA	Zip Code 95672	Amount of Each Disbursement this Period 843.92	
Purpose of Disbursement Write, Design and Send Text Messages		Category/ Type 001	Transaction ID : B-426	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. The Rosales Agency			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025	
Mailing Address PO Box 89			FEC Identification Number C	
City Rescue	State CA	Zip Code 95672	Amount of Each Disbursement this Period 563.00	
Purpose of Disbursement Strategic Consulting		Category/ Type 001	Transaction ID : B-427	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2035.21
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 42 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. The Rosales Agency			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025	
Mailing Address PO Box 89			FEC Identification Number C	
City Rescue	State CA	Zip Code 95672	Amount of Each Disbursement this Period 613.81	
Purpose of Disbursement Text Messages		Category/ Type 004	Transaction ID : B-428	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. The Rosales Agency			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2025	
Mailing Address PO Box 89			FEC Identification Number C	
City Rescue	State CA	Zip Code 95672	Amount of Each Disbursement this Period 15000.00	
Purpose of Disbursement Strategic Consulting		Category/ Type 001	Transaction ID : B-429	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. The Rosales Agency			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2025	
Mailing Address PO Box 89			FEC Identification Number C	
City Rescue	State CA	Zip Code 95672	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement Strategic Consulting		Category/ Type 001	Transaction ID : B-506	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	20613.81
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 50	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial)

A. Veterans In Politics

Mailing Address 8430 West Lake Mead Boulevard #109

City Las Vegas State NV Zip Code 89128

Purpose of Disbursement Advertising Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 10 / 24 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 500.00

Transaction ID : B-358

Memo Item

Full Name (Last, First, Middle Initial)

B. Veterans In Politics

Mailing Address 8430 West Lake Mead Boulevard #109

City Las Vegas State NV Zip Code 89128

Purpose of Disbursement Advertising Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 11 / 24 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 500.00

Transaction ID : B-471

Memo Item

Full Name (Last, First, Middle Initial)

C. Wild Fig BBQ

Mailing Address 9555 Del Webb Boulevard

City Las Vegas State NV Zip Code 89134

Purpose of Disbursement Food/Beverage Category/Type 001

Candidate Name

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

State: District:

Date of Disbursement 10 / 29 / 2025

FEC Identification Number C

Amount of Each Disbursement this Period 674.96

Transaction ID : B-463

Memo Item MEMO: Subvendor of-Bank of America

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 51902.38

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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)
Cody K 4 Congress

Full Name (Last, First, Middle Initial) A. Martin, Jerrad, , ,			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2025		
Mailing Address 3084 S Highland Dr			FEC Identification Number C		
City Las Vegas	State NV	Zip Code 89109	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Refund		Category/ Type 010	Transaction ID : B-468		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

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

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 45 OF 50	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Cody K 4 Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Bank of America		M M / D D / Y Y Y Y 10 / 01 / 2025
Mailing Address PO Box 672050		FEC Identification Number
City Dallas	State TX	Zip Code 75267
Purpose of Disbursement Credit Card Payment: Campaign Printing and Supplies		<input type="checkbox"/> C C00843334
Candidate Name Conservative Nevada Leadership PAC		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> 9014.59
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID : B-248
State: District:		<input type="checkbox"/> Memo Item

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="checkbox"/> 9014.59
TOTAL This Period (last page this line number only).....▶	<input type="checkbox"/> 9014.59

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : C-77**
Cody K 4 Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item			Election: 2026
Whipple, Cody, K, ,			<input checked="" type="checkbox"/> Primary
Mailing Address 4004 Whipple Ranch Road			<input type="checkbox"/> General
			<input type="checkbox"/> Other (specify) ▼
City Hiko	State NV	ZIP Code 89017	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
90000.00	0.00	90000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 06 / 10 / 2025	M M / D D / Y Y Y Y 12/31/2028	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	90000.00
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

NAME OF COMMITTEE (In Full) **Transaction ID : C-125**
Cody K 4 Congress

LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2026
Whipple, Cody, K, ,		<input checked="" type="checkbox"/> Primary
Mailing Address 4004 Whipple Ranch Road		<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼
City Hiko	State NV	ZIP Code 89017
		<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 30 / 2025	12/31/2028	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	10000.00
TOTALS This Period (last page in this line only).....▶	100000.00

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)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Cody K 4 Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bank of America			Nature of Debt (Purpose): Credit Card Payment: Campaign Printing and Supplies
Mailing Address PO Box 672050			
City Dallas	State TX	Zip Code 75267	

Outstanding Balance Beginning This Period 9014.59	Transaction ID : D-246	
Amount Incurred This Period 0.00	Payment This Period 9014.59	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capitol Caging Corporation			Nature of Debt (Purpose): Direct Mail Production and Mailing
Mailing Address 504 Shaw Road Ste 217			
City Sterling	State VA	Zip Code 20166	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D-1180	
Amount Incurred This Period 525.65	Payment This Period 0.00	Outstanding Balance at Close of This Period 525.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Consolidated Mailing Services			Nature of Debt (Purpose): Mailshop Services and Printing
Mailing Address 504 Shaw Road Suite 206			
City Sterling	State VA	Zip Code 20166	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D-1181	
Amount Incurred This Period 9816.14	Payment This Period 0.00	Outstanding Balance at Close of This Period 9816.14

1) SUBTOTALS This Period This Page (optional)	▶	10341.79
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)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

Cody K 4 Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Support Services			Nature of Debt (Purpose): Direct Mail Production and Mailing
Mailing Address 1155 15th Street Northwest Suite 410			
City Washington	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : D-1182
Amount Incurred This Period <input style="width:100%;" type="text" value="26855.45"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="26855.45"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Direct Support Systems, Inc.			Nature of Debt (Purpose): Direct Mail Production and Mailing
Mailing Address 3900 Jermantown Road Suite			
City Fairfax	State VA	Zip Code 22030	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : D-1183
Amount Incurred This Period <input style="width:100%;" type="text" value="2312.72"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="2312.72"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Forthright Strategy, Inc.			Nature of Debt (Purpose): Direct Mail Production and Mailing
Mailing Address 1155 15th Street Northwest Suite 410			
City Washington	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	Transaction ID : D-1185
Amount Incurred This Period <input style="width:100%;" type="text" value="4801.68"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="4801.68"/>	

1) SUBTOTALS This Period This Page (optional)	<input style="width:100%;" type="text" value="33969.85"/>
2) TOTALS This Period (last page this line number only)	<input style="width:100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input style="width:100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width:100%;" type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Cody K 4 Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Legacy Lists, Inc. - Brokerage			Nature of Debt (Purpose): Direct Mail Production and Mailing
Mailing Address 1155 15th Street Northwest Suite 410			
City Washington	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period		Transaction ID : D-1186	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
682.77	0.00	682.77	

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)	682.77
2) TOTALS This Period (last page this line number only)	44994.41
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	100000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	144994.41