

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

1 2 F E 4 M 5

MARK HARRIS FOR CONGRESS

ADDRESS (number and street)

PO BOX 1350

Check if different
than previously
reported. (ACC)

NORWOOD

NC

28128-1350

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00850404

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NC

08

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2025

through

M M / D D / Y Y Y Y
06 / 30 / 2025

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

Type or Print Name of Treasurer KELLEY, JINGER, , MRS.,

Signature of Treasurer

KELLEY, JINGER, , MRS.,

Date

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

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

MARK HARRIS FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	97318.98	191436.58
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	97318.98	191436.58
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	43332.42	108764.26
(b) Total Offsets to Operating Expenditures (from Line 14)	3951.78	4013.63
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	39380.64	104750.63
8. Cash on Hand at Close of Reporting Period (from Line 27)	198681.43	
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)	0.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

MARK HARRIS FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2025

To:

M M / D D / Y Y Y Y
06 / 30 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than
Political Committees****(i) Itemized (use Schedule A).....**

63300.00

107800.00

(ii) Unitemized

1768.98

5386.58

**(iii) TOTAL of contributions
from individuals**

65068.98

113186.58

(b) Political Party Committees.....

250.00

250.00

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

32000.00

78000.00

(d) The Candidate

0.00

0.00

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

97318.98

191436.58

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES**

2530.77

8851.66

13. LOANS:**(a) Made or Guaranteed by the
Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

**(c) TOTAL LOANS
(add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)**

3951.78

4013.63

**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).....**

103801.53

204301.87

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.....	43332.42	108764.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	15000.00	40000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	15000.00	40000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	979.60	3725.43
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	59312.02	152489.69

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	154191.92
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	103801.53
25. SUBTOTAL (add Line 23 and Line 24).....	257993.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	59312.02
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	198681.43

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

PAGE 5 OF 48

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

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

NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

BRIDGE, MARTHA, M, ,

A.

Mailing Address 5501 GORHAM DR

City

CHARLOTTE

State

NC

Zip Code

28226-6414

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
05 / 28 / 2025D D / Y Y Y Y Y
28 / 2025Y Y Y Y Y
2025

Transaction ID : AD1582AFB92D34FB2A61

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRIDGE, PETER, F, ,

B.

Mailing Address PO BOX 30875

City

CHARLOTTE

State

NC

Zip Code

28230-0875

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
05 / 28 / 2025D D / Y Y Y Y Y
28 / 2025Y Y Y Y Y
2025

Transaction ID : AD6C945F330FC463E8DF

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CERULLO, DAVID, , ,

C.

Mailing Address 8800 COVEY RISE CT

City

CHARLOTTE

State

NC

Zip Code

28226-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer

INSPIRATION MINISTRIES

Occupation

CHAIRMAN

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
05 / 23 / 2025D D / Y Y Y Y Y
23 / 2025Y Y Y Y Y
2025

Transaction ID : A6CFBE5EE9EA44A8DAC9

Amount of Each Receipt this Period

2500.00

☐ Memo Item

3500.00

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

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

CHERRY, JAMES, HOWARD, , JR.

A.

Mailing Address 319 MEDEARIS DR

City

CHARLOTTE

State

NC

Zip Code

28211-6043

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAROLINA MADE INC

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	5	

Transaction ID : AF92AFF9E35074C74BC4

Amount of Each Receipt this Period

3500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

CHERRY, LINDA, , ,

Mailing Address 319 MEDEARIS DR

City

CHARLOTTE

State

NC

Zip Code

28211-6043

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
0	5		1	3		2	0	5	

Transaction ID : A1A56F2CAD654425CA28

Amount of Each Receipt this Period

3500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

CONNER, TIMOTHY, DEAN, ,

Mailing Address 101 BERRY MOUNTAIN RD

City

CRAMERTON

State

NC

Zip Code

28032-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer

CONNER ENTERPRISES

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	5	

Transaction ID : AF539E6E1CF864D5687A

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

9000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

CROCKETT, LOUIS, J, , JR.

A.

Mailing Address 4819 KINNAMON RD

City

WINSTON SALEM

State

NC

Zip Code

27103-9780

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

PRINTING

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
06 / 20 / 2025

Transaction ID : AF37392C077F24A5F83D

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CROCKETT, MARILYN, W, ,

Mailing Address 4819 KINNAMON RD

City

WINSTON SALEM

State

NC

Zip Code

27103-9780

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
06 / 20 / 2025

Transaction ID : A5314B91C10B54965B59

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

FORRESTER, MARY, FRANCES, ,

Mailing Address 105 COUNTRY WOODS LANE

City

MOUNT HOLLY

State

NC

Zip Code

28120-5801

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
04 / 22 / 2025

Transaction ID : A1CDB51CEFGD94C5CB0C

Amount of Each Receipt this Period

1000.00

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

8000.00

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

GUY, JAMES, R, , JR.

A.

Mailing Address 4526 CARMEL RD

City

CHARLOTTE

State

NC

Zip Code

28226-7242

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUY PROPERTIES LLC

Occupation

REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	2	5

Transaction ID : ACE59AFFB6F5140ABA78

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HARDIN, DARRELL, G, ,

B.

Mailing Address 10124 SWEETLEAF PL

City

CHARLOTTE

State

NC

Zip Code

28278-6849

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
0	4		2	2		2	0	2	5

Transaction ID : AF8CDDF17DA60418C852

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HILL, AMY, POPE, ,

C.

Mailing Address 4445 RESEARCH FARM RD

City

HOOKERTON

State

NC

Zip Code

28538-9634

FEC ID number of contributing
federal political committee.

C

Name of Employer

TULL HILL FARMS INC

Occupation

AGRICULTURE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	5

Transaction ID : A3C44FA7096D1455B839

Amount of Each Receipt this Period

500.00

☐ Memo Item

6000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOYNER, ROBERT, A, ,

A.Mailing Address 219 WILLIAMSON RD
SUITE 2202City
MOORESVILLEState
NCZip Code
28117-6929FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBERT JOYNER CPAOccupation
ACCOUNTANT

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
06 20 2025

Transaction ID : A34736B93F18B4424BAE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KING, JOSEPH, WAYNE, ,

B.

Mailing Address P. O. BOX 944

City
KINGS MOUNTAINState
NCZip Code
28086-0944FEC ID number of contributing
federal political committee.

C

Name of Employer
OLD NORTH STRATEGIESOccupation
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
04 07 2025

Transaction ID : AAC0A5A2F20B1492BBD9

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAMB, JOHN, R, ,

C.

Mailing Address 200 COLLINGSWOOD RD

City
MOORESVILLEState
NCZip Code
28117-9472FEC ID number of contributing
federal political committee.

C

Name of Employer
SAMARITAN'S PURSEOccupation
PILOT

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
06 29 2025

Transaction ID : AF00219DDF73448D2A1A

Amount of Each Receipt this Period

3500.00

☐ Memo Item

5000.00

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

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

PAGE 10 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

LAMB, SHAWN, F, ,

A.

Mailing Address 200 COLLINGSWOOD RD

City

MOORESVILLE

State

NC

Zip Code

28117-9472

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN AIRLINESOccupation
FLIGHT ATTENDANT

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
06 / 29 / 2025

Transaction ID : A19C4F56930DB4C20838

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LYDEN, PATRICK, , ,

B.

Mailing Address 710 8TH ST NE

City

WASHINGTON

State

DC

Zip Code

20002-3604

FEC ID number of contributing
federal political committee.

C

Name of Employer
CURRENTSTRATEGIC LLCOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 27 / 2025

Transaction ID : A35CE50A78D9C4FA2BB6

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MOORE, WILLIAM, NEIL, ,

C.

Mailing Address 1505 S POINT RD

City

BELMONT

State

NC

Zip Code

28012-7503

FEC ID number of contributing
federal political committee.

C

Name of Employer
FRONTIER POLITICAL GROUPOccupation
SR CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2025

Transaction ID : A9B3012A1E8B14E47905

Amount of Each Receipt this Period

2000.00

☐ Memo Item

5750.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

MORGAN, WILLIAM, , ,

A.

Mailing Address 3110 DEL RIO PIKE

City

FRANKLIN

State

TN

Zip Code

37069-8712

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHN BOUCHARD & SONS CO.

Occupation

MANAGEMENT

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
05 16 2025

Transaction ID : AB9E1E27A70C440D99E3

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARK

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

B.

Mailing Address PO BOX 96006

City

WASHINGTON

State

DC

Zip Code

20090

FEC ID number of contributing
federal political committee.

C C00552851

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4145.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 16 2025

Transaction ID : A2879E61667774ADEB25

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

PITTMAN SR, MARK, E, ,

C.

Mailing Address 415 KING ST

City

WAXHAW

State

NC

Zip Code

28173-8949

FEC ID number of contributing
federal political committee.

C

Name of Employer

BANK OF AMERICA

Occupation

IT

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
05 28 2025

Transaction ID : AF5D98F46A3C44103B67

Amount of Each Receipt this Period

100.00

☐ Memo Item

600.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

PITTMAN SR, MARK, E, ,

Mailing Address 415 KING ST

City
WAXHAWState
NCZip Code
28173-8949FEC ID number of contributing
federal political committee.

C

Name of Employer
BANK OF AMERICAOccupation
IT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 28 2025

Transaction ID : AE57C96C0ACBA457D860

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PORTER, GARRY, D, ,

Mailing Address 126 NORCROSS LN

City
MOORESVILLEState
NCZip Code
28117-8891FEC ID number of contributing
federal political committee.

C

Name of Employer
MOORESVILLE DEALERSHIPOccupation
CAR DEALER

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
06 01 2025

Transaction ID : ADFB4BCBCFE3847EB867

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCRIBNER, RANDALL, , ,

Mailing Address 10700 HICKORY RIDGE RD

City
HARRISBURGState
NCZip Code
28075-7676FEC ID number of contributing
federal political committee.

C

Name of Employer
RTS LAND & DEVELOPMENT, LLCOccupation
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
05 24 2025

Transaction ID : AABFF19F4B66B44FC941

Amount of Each Receipt this Period

250.00

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

3850.00

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

SCRIBNER, RANDALL, , ,

A.

Mailing Address 10700 HICKORY RIDGE RD

City

HARRISBURG

State

NC

Zip Code

28075-7676

FEC ID number of contributing
federal political committee.

C

Name of Employer

RTS LAND & DEVELOPMENT, LLC

Occupation

OWNER

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
06 20 2025

Transaction ID : AC31771BC33484135853

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

SMITH, ARTHUR, H, ,

Mailing Address 134 SAILVIEW RD

City

MOORESVILLE

State

NC

Zip Code

28117-7560

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
06 20 2025

Transaction ID : A357965F38D224BFDA87

Amount of Each Receipt this Period

1500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SNYDER, JOHN, C, ,

Mailing Address 9431 SARDIS GLEN DR

City

MATTHEWS

State

NC

Zip Code

28105-1571

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROSPERING SOLUTIONS

Occupation

GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : A946C000A3C864C919E0

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)..... ▶

3000.00

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

STARNES, BRYAN, WAYNE, ,

A. Mailing Address 4486 WIKE RDCity
GRANITE FALLSState
NCZip Code
28630-8617FEC ID number of contributing
federal political committee.

C

Name of Employer
ALG SENIOR LLCOccupation
CFO

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
05 / 29 / 2025

Transaction ID : A8725AD8691D84BCA9B5

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STEWART, FRANK, , ,

B. Mailing Address 575 SEPARK CIRCity
GASTONIAState
NCZip Code
28054-7467FEC ID number of contributing
federal political committee.

C

Name of Employer
PREMIER BODY ARMOROccupation
CEO

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
04 / 02 / 2025

Transaction ID : AE8B99E3F8476423F8B0

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TRANDAH, PAMELA, JEAN, ,

C. Mailing Address 968 13TH AVE SECity
FOREST LAKEState
MNZip Code
55025-1927FEC ID number of contributing
federal political committee.

C

Name of Employer
TRIUMPH HIGHER EDUCATIONOccupation
COMPLIANCE

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
05 / 15 / 2025

Transaction ID : A885A879B769C47DCB43

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)..... ▶

6500.00

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

VOGLER, SHELIA, H, ,

A.

Mailing Address 3941 COPPERFIELD RIDGE CT

City

WINSTON SALEM

State

NC

Zip Code

27106-3591

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
06 / 20 / 2025

Transaction ID : A0BFE2CC177364324A47

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

WALKOWIAK, WILLIAM, , ,

Mailing Address 3201 YARMOUTH LN

City

GASTONIA

State

NC

Zip Code

28056-7875

FEC ID number of contributing
federal political committee.

C

Name of Employer

COLLISION SAFETY CONSULTANTS

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 06 / 2025

Transaction ID : A5F355DB1CDD94DC3A6B

Amount of Each Receipt this Period

2600.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

WALL, JENNIFER, , ,

Mailing Address 5029 COURTNEY HUNTSVILLE RD

City

YADKINVILLE

State

NC

Zip Code

27055-8633

FEC ID number of contributing
federal political committee.

C

Name of Employer

CSA CHEERLEADING

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
06 / 20 / 2025

Transaction ID : A8E2F8933AC5B403F90D

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)..... ▶

9600.00

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 16 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

WARLICK, ANDERSON, , ,

A. Mailing Address PO BOX 1787

City
GASTONIA

State
NC

Zip Code
28053-1787

FEC ID number of contributing
federal political committee.

C

Name of Employer
PARKDALE MILLS

Occupation
CEO

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
04 01 2025

Transaction ID : A8A55AA87574645C1BFD

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WOLFE, TC, , ,

B. Mailing Address 6800 SW 40TH ST
#475

City
MIAMI

State
FL

Zip Code
33155-3708

FEC ID number of contributing
federal political committee.

C

Name of Employer
NCGA

Occupation
LOBBYIST

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
06 04 2025

Transaction ID : AE14222BD1F46493BA38

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

2500.00

63300.00

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

PAGE 17 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

SWEET UNION REPUBLICAN WOMEN**A.**

Mailing Address 2104 PLEASANT KNOLL LN

City
MONROEState
NCZip Code
28112-6179FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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
05 13 2025

Transaction ID : A7B1BCB0F7127459CAEF

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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

Amount of Each Receipt this Period

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

250.00

250.00

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

PAGE 18 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMALGAMATED SUGAR COMPANY PAC**A.**Mailing Address 1951 S SATURN WAY
BOISECity
BOISEState
IDZip Code
83709-2900FEC ID number of contributing
federal political committee.**C** C00326389

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 28 2025

Transaction ID : AAEBAF47CC6284F5F90C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ASSOCIATED BUILDERS AND CONTRACTORS, INC PAC**B.**Mailing Address 440 FIRST STREET NW
SUITE 200City
WASHINGTONState
DCZip Code
20001FEC ID number of contributing
federal political committee.**C** C00010421

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : AC51C046B47C048FDB08

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AUSTIN SCOTT FOR CONGRESS INC**C.**

Mailing Address PO BOX 2530

City
TIFTONState
GAZip Code
31793-2530FEC ID number of contributing
federal political committee.**C** C00482737

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 16 2025

Transaction ID : A3D53C6AE7932421E8FB

Amount of Each Receipt this Period

2000.00

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

5500.00

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

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

CROP INSURANCE PROFESSIONALS ASSOCIATION PAC (CIPA PAC)**A.**

Mailing Address 174 N CAROLINA AVE SE

City

WASHINGTON

State

DC

Zip Code

20003-1841

FEC ID number of contributing
federal political committee.**C** C00503680

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A92B6CC41CFA841C99CA

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CROP INSURANCE PROFESSIONALS ASSOCIATION PAC (CIPA PAC)**B.**

Mailing Address 174 N CAROLINA AVE SE

City

WASHINGTON

State

DC

Zip Code

20003-1841

FEC ID number of contributing
federal political committee.**C** C00503680

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A72166DE737F241B4A02

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FLORIDA SUGAR CANE LEAGUE PAC**C.**Mailing Address 1301 PENNSYLVANIA AVE NW
STE 401

City

WASHINGTON

State

DC

Zip Code

20004-1701

FEC ID number of contributing
federal political committee.**C** C00012328

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : AE40DFA201EEA42B1813

Amount of Each Receipt this Period

1000.00

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

3500.00

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

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESSFull Name (Last, First, Middle Initial)
HOUSE CONSERVATIVES FUND

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824-0844FEC ID number of contributing
federal political committee.**C** C00326439

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A45A7ABF95F1E4CC4A50

Amount of Each Receipt this Period

2000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDS PAC)

Mailing Address 7525 RED RIVER ROAD

City
WAHPETONState
NDZip Code
58075FEC ID number of contributing
federal political committee.**C** C00164939

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	5

Transaction ID : A3F8EE3186FDF4110853

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
NATIONAL CHICKEN COUNCIL PACMailing Address 1152 15TH ST NW
STE 430City
WASHINGTONState
DCZip Code
20005-1790FEC ID number of contributing
federal political committee.**C** C00034272

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : A1A02985D338245DD974

Amount of Each Receipt this Period

1000.00

☐ Memo Item

4000.00

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

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCEMENT OF COTTON

A.

Mailing Address P.O. BOX 2995

City
CORDOVAState
TNZip Code
38088-2995FEC ID number of contributing
federal political committee.**C** C00023028

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	5	

Transaction ID : AFBA38DF960E2476DA42

Amount of Each Receipt this Period

4000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995

City
CORDOVAState
TNZip Code
38088-2995FEC ID number of contributing
federal political committee.**C** C00023028

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	5	

Transaction ID : A22E3E99C6325428F9EA

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC PAC

Mailing Address PO BOX 1090

City
CHERRYVILLEState
NCZip Code
28021-1090FEC ID number of contributing
federal political committee.**C** C00405555

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	5	

Transaction ID : A542B4E411C934C8C83F

Amount of Each Receipt this Period

1000.00

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

6000.00

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL SORGHUM PRODUCERS PAC**A.** Mailing Address 4201 N INTERSTATE 27City
LUBBOCKState
TXZip Code
79403-7507FEC ID number of contributing
federal political committee.**C** C00475673

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		07		2025

Transaction ID : AD4932D41F3994E29AE8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NC PEANUT GROWERS ASSOC PAC FKA VIRGINIA-CAROLINA'S PEANUT PAC**B.** Mailing Address 103 TRIANGLE CT
PO BOX 8City
NASHVILLEState
NCZip Code
27856-1279FEC ID number of contributing
federal political committee.**C** C00185652

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		15		2025

Transaction ID : AEB6BDBB80368466E900

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NC SOYBEAN PRODUCERS ASSOC INC (NC SOYPAC)**C.** Mailing Address 3600 HAWORTH DR
STE 2City
RALEIGHState
NCZip Code
27609-7225FEC ID number of contributing
federal political committee.**C** C00491456

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		28		2025

Transaction ID : A230FC83241FB40BBA20

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

PAGE 23 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

NCCPAC

A.

Mailing Address PO BOX 656

City
NASHVILLEState
NCZip Code
27856-0656FEC ID number of contributing
federal political committee.**C** C00416297

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

Transaction ID : A09CBDC4398414DF585E

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PLAINS COTTON GROWERS INC. PAC

B.

Mailing Address 8303 ABERDEEN AVE

City
LUBBOCKState
TXZip Code
79424-3453FEC ID number of contributing
federal political committee.**C** C00599084

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

Transaction ID : A107EFB392D9E4F53B57

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC

C.

Mailing Address 824 S MILLEDGE AVE, STE 101

City
ATHENSState
GAZip Code
30605FEC ID number of contributing
federal political committee.**C** C00570226

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	2	5

Transaction ID : AAF7F736B48B94650888

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2024 PRIMARY DEBT RETIREMENT

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

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

SOUTHEAST COTTON COMMITTEE (SECC) SOUTHERN COTTONGROWERS INC/SE COTTON GINNERS ASSN

A.

Mailing Address 139 PROMINENCE CT

STE 110

City

DAWSONVILLE

State

GA

Zip Code

30534-8940

FEC ID number of contributing
federal political committee.**C** C00300426

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	2	5

Transaction ID : A1EB235B673164333B01

Amount of Each Receipt this Period

1000.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

SUGAR CANE GROWERS COOPERATIVE OF FLORIDA PAC

Mailing Address 1500 GEORGE WEDGWORTH WAY

City

BELLE GLADE

State

FL

Zip Code

33430

FEC ID number of contributing
federal political committee.**C** C00254656

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : A4DD228872E3B41B7AD6

Amount of Each Receipt this Period

500.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

TRAVIS PAGE FOR DISTRICT ATTORNEY

Mailing Address 3140 ASHWOOD PARK DR

City

BELMONT

State

NC

Zip Code

28012-6743

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

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	2	5

Transaction ID : A5A5D2FFAB04040F4A56

Amount of Each Receipt this Period

2000.00



Memo Item

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

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

UNITED STATES PEANUT PAC (US PEANUT PAC)

A.

Mailing Address 313 MASSACHUSETTS AVE NE

City

WASHINGTON

State

DC

Zip Code

20002-5701

FEC ID number of contributing
federal political committee.

C C00502807

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : A3F20F340575841248CB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

USA RICE FEDERATION PAC

B.

Mailing Address 2101 WILSON BLVD
STE 610

City

ARLINGTON

State

VA

Zip Code

22201-3040

FEC ID number of contributing
federal political committee.

C C00308478

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 23 2025

Transaction ID : A8E374866FB224B869C1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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)..... ►

2000.00

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

32000.00

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

PAGE 26 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

FRESHMAN AGRICULTURAL REPUBLICAN MEMBERS TRUST (FARM TRUST)**A.**

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824FEC ID number of contributing
federal political committee.**C** C00493783

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8851.66

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : A70DD8D08D9654F43907

Amount of Each Receipt this Period

2530.77

☐ Memo Item
JFC PAYOUT**B.**

Full Name (Last, First, Middle Initial)

MICHIGAN SUGAR COMPANY GROWERS PACMailing Address 122 UPTOWN DR
STE 300City
BAY CITYState
MIZip Code
48708FEC ID number of contributing
federal political committee.**C** C00384354

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 01 2025

Transaction ID : AFC9C9760914D4A8DB41

Amount of Each Receipt this Period

2000.00

☒ Memo Item**C.**

Full Name (Last, First, Middle Initial)

FLORIDA SUGAR CANE LEAGUE PACMailing Address 1301 PENNSYLVANIA AVE NW
STE 401City
WASHINGTONState
DCZip Code
20004-1701FEC ID number of contributing
federal political committee.**C** C00012328

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 18 2025

Transaction ID : ADF914D182195439DBBA

Amount of Each Receipt this Period

400.00

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

2530.77

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

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

PAGE 27 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

LIVESTOCK MARKETING ASSOCIATION LMA PAC**A.**Mailing Address 11501 OUTLOOK ST
STE 250City
OVERLAND PARKState
KSZip Code
66211FEC ID number of contributing
federal political committee.**C** C00244400

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : A1F7A1C2A44C94C12809

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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

Amount of Each Receipt this Period

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

0.00

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

2530.77

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

PAGE 28 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

DELTA AIR LINES

A.

Mailing Address 1030 DELTA BLVD

City

ATLANTA

State

GA

Zip Code

30354-1989

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3951.78

Date of Receipt

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

Transaction ID : AA78C7238065642DEB09

Amount of Each Receipt this Period

3877.59



Memo Item

AIRFARE REFUND

B.

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

Amount of Each Receipt this Period



Memo Item

C.

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

Amount of Each Receipt this Period



Memo Item

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

3877.59

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

3877.59

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

PAGE 29 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMA RESTAURANT

Mailing Address 885 NEW JERSEY AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2025

City
WASHINGTONState
DCZip Code
20003-3385

FEC Identification Number

C

Purpose of Disbursement
FR EVENT DEPOSIT

003

Amount of Each Disbursement this Period

1340.63

Transaction ID : BF6A3870EBAF44064A8F

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		14		2025

City
FORT WORTHState
TXZip Code
76155-1801

FEC Identification Number

C

Purpose of Disbursement
AIRFARE

002

Amount of Each Disbursement this Period

574.96

Transaction ID : BED79C07040874C7E97E

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2025

City
FORT WORTHState
TXZip Code
76155-1801

FEC Identification Number

C

Purpose of Disbursement
AIRFARE

002

Amount of Each Disbursement this Period

243.48

Transaction ID : B49349B45A2A540CFBDC

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/> House
<input 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).....▶

2159.07

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

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

PAGE 30 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

City
FORT WORTHState
TXZip Code
76155-1801Purpose of Disbursement
AIRFARE

002

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

141.01

Transaction ID : BBC3655BE1F474311966

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

City
FORT WORTHState
TXZip Code
76155-1801Purpose of Disbursement
AIRFARE FEE

002

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.02

Transaction ID : B13963604D1CC49A6969

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

City
FORT WORTHState
TXZip Code
76155-1801Purpose of Disbursement
AIRFARE

002

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

976.97

Transaction ID : B708A33883D18444FAE6

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

1158.00

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

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

PAGE 31 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		22		2025

City
FORT WORTHState
TXZip Code
76155-1801

FEC Identification Number

C

Purpose of Disbursement
AIRFARE FEE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

74.13

Transaction ID : B30A6C5FC89C24B46B1C

☐ 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. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770

Date of Disbursement

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

City
NEW ORLEANSState
LAZip Code
70112-5204

FEC Identification Number

C

Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

100.30

Transaction ID : BAD9DFD9A10AC410F99F

☐ 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. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770

Date of Disbursement

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

City
NEW ORLEANSState
LAZip Code
70112-5204

FEC Identification Number

C

Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

124.60

Transaction ID : B37329036C9E442779E4

☐ 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).....▶

299.03

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

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

PAGE 32 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.70

Transaction ID : BB9A8611F405448F89A8

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

101.00

Transaction ID : B41163890C31049B3959

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.30

Transaction ID : B856D110C877F4C99B7D

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

103.00

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

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

PAGE 33 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : BBA12789356104DC0A34

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.30

Transaction ID : B78A3BF6B901A4836B91

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.70

Transaction ID : BB291AD75A54249EB875

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

22.30

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

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

PAGE 34 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.30

Transaction ID : BC8A812E35EDD49EA873

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.30

Transaction ID : B65FBBA412DF34621A42

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT INCMailing Address 1340 POYDRAS ST
STE 1770City
NEW ORLEANSState
LAZip Code
70112-5204Purpose of Disbursement
CC PROCESSING FEES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6.30

Transaction ID : BA3425964FF7E4CBD8C4

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

36.90

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

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

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INTERNATIONAL, INC

Mailing Address 205 PENNSYLVANIA AVE SE

City
WASHINGTONState
DCZip Code
20003-1164Purpose of Disbursement
COMPLIANCE REPORTING SOFTWARE

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2100.00

Transaction ID : B0B97EB7A68C540DCA14

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BANKS, ELIZABETH, , ,Mailing Address 9650 STRICKLAND RD
STE 103City
RALEIGHState
NCZip Code
27615-1903Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : BAC198956609C450C878

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONSERVATIVE PARTNERSHIP CAMPUS INC

Mailing Address 300 INDEPENDENCE AVE SE

City
WASHINGTONState
DCZip Code
20003-1021Purpose of Disbursement
MEMBERSHIP DUES

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B57E9248686764BC88C9

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

11100.00

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

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

PAGE 36 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DELTA AIR LINES

Mailing Address 1030 DELTA BLVD

City
ATLANTAState
GAZip Code
30354-1989Purpose of Disbursement
AIRFARE FEE

002

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

34.99

Transaction ID : B48DEC3133A814402965

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DELTA AIR LINES

Mailing Address 1030 DELTA BLVD

City
ATLANTAState
GAZip Code
30354-1989Purpose of Disbursement
AIRFARE FEE

002

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

39.20

Transaction ID : B98836E73FB694DC5B6E

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA AIR LINES

Mailing Address 1030 DELTA BLVD

City
ATLANTAState
GAZip Code
30354-1989Purpose of Disbursement
AIRFARE

002

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3877.59

Transaction ID : B650BC39338894815846

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

3951.78

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

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

PAGE 37 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DICKSON, HEATHER, , ,

Mailing Address 11900 COACHMANS WAY

City
RALEIGHState
NCZip Code
27614-9736Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B05158F35A4C14D2180D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ENDGAME CONSULTING, LLC

Mailing Address PO BOX 550847

City
GASTONIAState
NCZip Code
28055-0847Purpose of Disbursement
DIGITAL & WEBSITE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B83ED41706485447989D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ENDGAME CONSULTING, LLC

Mailing Address PO BOX 550847

City
GASTONIAState
NCZip Code
28055-0847Purpose of Disbursement
DIGITAL & WEBSITE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B23BDA66D962141CEB34

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

5500.00

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

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

PAGE 38 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. J-BOOKS SERVICES, INC

Mailing Address 236 SUMMERHOUSE PT

City
NORWOODState
NCZip Code
28128-4501Purpose of Disbursement
COMPLIANCE REPORTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3300.00

Transaction ID : B5A5652D4334E4E169FD

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. J-BOOKS SERVICES, INC

Mailing Address 236 SUMMERHOUSE PT

City
NORWOODState
NCZip Code
28128-4501Purpose of Disbursement
COMPLIANCE REPORTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B9F1E35C4C8894336B10

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. J-BOOKS SERVICES, INC

Mailing Address 236 SUMMERHOUSE PT

City
NORWOODState
NCZip Code
28128-4501Purpose of Disbursement
COMPLIANCE REPORTING

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1125.00

Transaction ID : B663AE8AC05AA4B3987E

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

5925.00

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

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

PAGE 39 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LUMBEE REGIONAL DEVELOPMENT ASSOCMailing Address 636 PROSPECT RD
PO BOX 68City
PEMBROKEState
NCZip Code
28372Purpose of Disbursement
AD BUY

004

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

412.41

Transaction ID : B233CD21FB9B84F5E91C

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
MEALS/MEETINGS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7386.03

Transaction ID : B7785D792CB1B4A6DAA3

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
MEALS/MEETINGS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

294.53

Transaction ID : BF47173E60F90452EB2C

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

8092.97

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

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

PAGE 40 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003-1801Purpose of Disbursement
MEALS/MEETINGS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

104.83

Transaction ID : B6BD9F3F509F24B6ABFD

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE SMOKE PIT

Mailing Address 1507 W ROOSEVELT BLVD

City
MONROEState
NCZip Code
28110-2751Purpose of Disbursement
CATERING DISTRICT LAW ENFORCEMENT LUNCH

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

534.74

Transaction ID : B6BFC3725F24B4D3C882

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TRATTORIA ALBERTO

Mailing Address 506 8TH ST SE

City
WASHINGTONState
DCZip Code
20003-2834Purpose of Disbursement
MEALS/MEETINGS

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input 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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1182.17

Transaction ID : B0168FA5212A147F9846

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

1821.74

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

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

PAGE 41 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

18.29

Transaction ID : BB070AE4153B8460BAA2

☐ 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. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

39.92

Transaction ID : B057E834EBE3A4897BD5

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

69.93

Transaction ID : B43DC556686264EE0833

☐ 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).....▶

128.14

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

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

PAGE 42 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

121.94

Transaction ID : B124980B788CD4816854

☐ 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. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

43.47

Transaction ID : B2E5135DC93464F0EBC8

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

54.17

Transaction ID : B654F76BC2B4C4C07B9B

☐ 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).....▶

219.58

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

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

PAGE 43 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

32.98

Transaction ID : B1322475A19F044CB860

☐ 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. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

23.55

Transaction ID : B2FF8DFD0116451DA84

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

54.84

Transaction ID : B5C6BBE2D39DB4BBFB00

☐ 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).....▶

111.37

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

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

PAGE 44 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

43.00

Transaction ID : B6EAB5E03D6644756B6C

☐ 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. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

54.33

Transaction ID : BCD3B97E168B844D080B

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94158-2203

FEC Identification Number

C

Purpose of Disbursement
CAR SERVICE

002

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

56.26

Transaction ID : B40DF5DF9BF704772BF6

☐ 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).....▶

153.59

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

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

PAGE 45 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. USSERY, ELISE, , ,Mailing Address 1001 AVENT HL
APT A08City
RALEIGHState
NCZip Code
27606-8032Purpose of Disbursement
FUNDRAISING COMMISSION

003

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="checked" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2135.05

Transaction ID : B6AFC208F620546DA9E5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

2135.05

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

42917.52

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

PAGE 46 OF 48

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

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NAME OF COMMITTEE (In Full)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HARRIS, MARK, EVERETTE, ,Mailing Address 6112 CREFT CIR
#215City
INDIAN TRAILState
NCZip Code
28079-5537Purpose of Disbursement
LOAN REPAYMENT: LOAN RECEIVEDCandidate Name
HARRIS, MARK, EVERETTE, ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

FEC Identification Number

C C00850404

Amount of Each Disbursement this Period

5000.00

Transaction ID : B5C159B2A8BBF4E8DA3B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HARRIS, MARK, EVERETTE, ,Mailing Address 6112 CREFT CIR
#215City
INDIAN TRAILState
NCZip Code
28079-5537Purpose of Disbursement
LOAN REPAYMENT: LOAN RECEIVEDCandidate Name
HARRIS, MARK, EVERETTE, ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2025

FEC Identification Number

C C00850404

Amount of Each Disbursement this Period

5000.00

Transaction ID : BE5D22B172D9E4CBEBDC

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HARRIS, MARK, EVERETTE, ,Mailing Address 6112 CREFT CIR
#215City
INDIAN TRAILState
NCZip Code
28079-5537Purpose of Disbursement
LOAN REPAYMENT: LOAN RECEIVEDCandidate Name
HARRIS, MARK, EVERETTE, ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2025

FEC Identification Number

C C00850404

Amount of Each Disbursement this Period

5000.00

Transaction ID : B7DEFF482549249C0B06

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

15000.00

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

15000.00

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

PAGE 47 OF 48

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

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)

MARK HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NC GOP

Mailing Address 1506 HILLSBOROUGH ST

Date of Disbursement

M M	D D	Y Y Y Y
05	16	2025

City
RALEIGHState
NCZip Code
27605-1831

FEC Identification Number

C

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : BB1AAEB25E274494AAB4

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. NC GOP

Mailing Address 1506 HILLSBOROUGH ST

Date of Disbursement

M M	D D	Y Y Y Y
06	01	2025

City
RALEIGHState
NCZip Code
27605-1831

FEC Identification Number

C

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

239.80

Transaction ID : BF7B0A3762A4C411F99F

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. NC GOP

Mailing Address 1506 HILLSBOROUGH ST

Date of Disbursement

M M	D D	Y Y Y Y
06	01	2025

City
RALEIGHState
NCZip Code
27605-1831

FEC Identification Number

C

Purpose of Disbursement
CONTRIBUTION

011

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

239.80

Transaction ID : BE3B97764EBB248178EF

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

979.60

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

979.60

SCHEDULE C (FEC Form 3)
LOANS

PAGE 48 OF 48

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

NAME OF COMMITTEE (In Full)

Transaction ID : C1C6C41CDD7AA4B2CB4A

MARK HARRIS FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

HARRIS, MARK, EVERETTE, ,

Mailing Address

6112 CREFT CIR
#215

City

INDIAN TRAIL

State

NC

ZIP Code

28079-5537

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

25000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 10 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
NONE

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

0.00

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

0.00

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