

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

TOM VO FOR CONGRESS

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

| | 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)) | <input type="text" value="2800.00"/> | <input type="text" value="2800.00"/> |
| (b) Total Contribution Refunds (from Line 20(d)) | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | <input type="text" value="2800.00"/> | <input type="text" value="2800.00"/> |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | <input type="text" value="945.00"/> | <input type="text" value="945.00"/> |
| (b) Total Offsets to Operating Expenditures (from Line 14) | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | <input type="text" value="945.00"/> | <input type="text" value="945.00"/> |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | <input type="text" value="501855.00"/> | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="500000.00"/> | |

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

TOM VO FOR CONGRESS

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

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 2250.00 | 2250.00 |
| (ii) Unitemized..... | 550.00 | 550.00 |
| (iii) TOTAL of contributions from individuals ▶ | 2800.00 | 2800.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 2800.00 | 2800.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 500000.00 | 500000.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 500000.00 | 500000.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 502800.00 | 502800.00 |

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..... | 945.00 | 945.00 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 945.00 | 945.00 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 0.00 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 502800.00 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 502800.00 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 945.00 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 501855.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 10
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
TOM VO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STUPPY, LAURENCE, J., ,

Mailing Address 6872 VISTA DEL SOL DR

City HUNTINGTON BEACH State CA Zip Code 92647

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation ENGINEER

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
12 30 2025

Transaction ID : A7461A38946CB4CF9BBB

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TRAN, ERIC, , ,

Mailing Address 15751 BROOKHURST ST STE 234

City WESTMINSTER State CA Zip Code 92683

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation BUSINESSMAN

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
12 23 2025

Transaction ID : AF5D38D22DA754866B79

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
VOUNG, HUYNH, MAI, ,

Mailing Address 1758 FUMIA CT

City SAN JOSE State CA Zip Code 95131-1613

FEC ID number of contributing federal political committee. C

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 23 2025

Transaction ID : A06AB41BAB2E94B278D8

Amount of Each Receipt this Period
250.00

Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2250.00 |
| TOTAL This Period (last page this line number only).....▶ | 2250.00 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 10
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM VO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VO, TOM, , ,

Mailing Address PO BOX 8312

City HUNTINGTON BEACH State CA Zip Code 92615-8312

FEC ID number of contributing federal political committee. **C** H6CA45209

Name of Employer CA Occupation CANDIDATE

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
20000.00

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

Transaction ID : **AE46A8AB14C014A95B42**

Amount of Each Receipt this Period
20000.00

Memo Item
CANDIDATE LOAN

B. Full Name (Last, First, Middle Initial)
VO, TOM, , ,

Mailing Address PO BOX 8312

City HUNTINGTON BEACH State CA Zip Code 92615-8312

FEC ID number of contributing federal political committee. **C** H6CA45209

Name of Employer CA Occupation CANDIDATE

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
200000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 12 / 2025

Transaction ID : **A053256E7784F44ECA9B**

Amount of Each Receipt this Period
180000.00

Memo Item
CANDIDATE LOAN

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

Mailing Address PO BOX 8312

City HUNTINGTON BEACH State CA Zip Code 92615-8312

FEC ID number of contributing federal political committee. **C** H6CA45209

Name of Employer CA Occupation CANDIDATE

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500000.00

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

Transaction ID : **AE909B5E960DB4765B25**

Amount of Each Receipt this Period
300000.00

Memo Item
CANDIDATE LOAN

SUBTOTAL of Receipts This Page (optional)..... ▶ 500000.00

TOTAL This Period (last page this line number only)..... ▶ 500000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 10 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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

NAME OF COMMITTEE (In Full)
TOM VO FOR CONGRESS

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. AXCAPITAL, LLC | | Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2025 |
| Mailing Address 800 W 47TH ST STE 200 | | FEC Identification Number C |
| City KANSAS CITY | State MO | Zip Code 64112-1244 |
| Purpose of Disbursement COMPLIANCE CONSULTING | Category/ Type 001 | |
| Candidate Name | Amount of Each Disbursement this Period 355.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : BC90B9F8877F7499C83F |
| State: District: | <input type="checkbox"/> Memo Item | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. AXCAPITAL, LLC | | Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2025 |
| Mailing Address 800 W 47TH ST STE 200 | | FEC Identification Number C |
| City KANSAS CITY | State MO | Zip Code 64112-1244 |
| Purpose of Disbursement COMPLIANCE CONSULTING | Category/ Type 001 | |
| Candidate Name | Amount of Each Disbursement this Period 555.00 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID : B378183A2649E479B990 |
| State: District: | <input type="checkbox"/> Memo Item | |

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

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 910.00 |
| TOTAL This Period (last page this line number only).....▶ | 910.00 |

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TOM VO FOR CONGRESS** Transaction ID : **CE46A8AB14C014A95B42**

| | | | |
|--|-------------|------------------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) | | <input type="checkbox"/> Memo Item | Election: 2026 |
| VO, TOM, , , | | | <input checked="" type="checkbox"/> Primary |
| Mailing Address PO BOX 8312 | | | <input type="checkbox"/> General |
| | | | <input type="checkbox"/> Other (specify) ▼ |
| City HUNTINGTON BEACH | State CA | ZIP Code 92615-8312 | <input checked="" type="checkbox"/> Personal Funds of the Candidate |

| | | |
|-------------------------------------|------------------------------------|---|
| Original Amount of Loan 20000.00 | Cumulative Payment To Date 0.00 | Balance Outstanding at Close of This Period 20000.00 |
|-------------------------------------|------------------------------------|---|

| | | | | |
|--------------|---------------------------------------|-----------------------------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | M M / D D / Y Y Y Y 11 / 11 / 2025 | M M / D D / Y Y Y Y NONE | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---|----------|
| SUBTOTALS This Period This Page (optional).....▶ | 20000.00 |
| TOTALS This Period (last page in this line only).....▶ | |

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TOM VO FOR CONGRESS** Transaction ID : **CE909B5E960DB4765B25**

| | | | |
|--|-------|------------------------------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) | | <input type="checkbox"/> Memo Item | Election: 2026 |
| VO, TOM, , , | | | <input checked="" type="checkbox"/> Primary |
| Mailing Address | | | <input type="checkbox"/> General |
| PO BOX 8312 | | | <input type="checkbox"/> Other (specify) ▼ |
| City | State | ZIP Code | <input checked="" type="checkbox"/> Personal Funds of the Candidate |
| HUNTINGTON BEACH | CA | 92615-8312 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 300000.00 | 0.00 | 300000.00 |

| | | | | |
|--------------|---------------------------------------|-----------------------------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | M M / D D / Y Y Y Y 11 / 14 / 2025 | M M / D D / Y Y Y Y NONE | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City | State |
| ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City | State |
| ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City | State |
| ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City | State |
| ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---|-----------|
| SUBTOTALS This Period This Page (optional).....▶ | 300000.00 |
| TOTALS This Period (last page in this line only).....▶ | |

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

SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : C053256E7784F44ECA9B**
TOM VO FOR CONGRESS

| | | |
|---|-------------|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item | | Election: 2026 |
| VO, TOM, , , | | <input checked="" type="checkbox"/> Primary |
| Mailing Address PO BOX 8312 | | <input type="checkbox"/> General |
| | | <input type="checkbox"/> Other (specify) ▼ |
| City HUNTINGTON BEACH | State CA | ZIP Code 92615-8312 |
| | | <input checked="" type="checkbox"/> Personal Funds of the Candidate |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 180000.00 | 0.00 | 180000.00 |

| | | | | |
|--------------|---------------------------------------|-----------------------------|----------------------------------|---|
| TERMS | Date Incurred | Date Due | Interest Rate (If none, enter 0) | Secured: |
| | M M / D D / Y Y Y Y 11 / 12 / 2025 | M M / D D / Y Y Y Y NONE | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|--------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: |

| | |
|---|-----------|
| SUBTOTALS This Period This Page (optional).....▶ | 180000.00 |
| TOTALS This Period (last page in this line only).....▶ | 500000.00 |

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