



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Dan Innis for Senate**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	48502.53
(b) Total Contribution Refunds (from Line 20(d)) .....	6763.11	6763.11
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 6763.11	41739.42
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	36045.82	40153.41
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	36045.82	40153.41
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	1586.01	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**Dan Innis for Senate**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	46386.52
(ii) Unitemized.....	0.00	2116.01
(iii) TOTAL of contributions from individuals ▶	0.00	48502.53
(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))..	0.00	48502.53
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	0.00	48502.53

**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.....	36045.82	40153.41
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 .....	6763.11	6763.11
(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)).....	6763.11	6763.11
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	42808.93	46916.52

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	44394.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	44394.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	42808.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1586.01

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3N

Transaction ID :

All General election and excess contributions have been refunded. The campaign continues to wind down operations.

Form/Schedule:

Transaction ID:

# 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 6 OF 9	
	<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)  
**Dan Innis for Senate**

Full Name (Last, First, Middle Initial) <b>A. INNIS, DANIEL, E, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2025	
Mailing Address 552 STATE STREET			FEC Identification Number C H4NH01219	
City PORTSMOUTH	State NH	Zip Code 03801-4327	Amount of Each Disbursement this Period 6728.10	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type	Transaction ID : SB17.I22	
Candidate Name INNIS, DANIEL, E, ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" 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: NH District: 01				

Full Name (Last, First, Middle Initial) <b>B. HARRIS MEDIA, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2025	
Mailing Address 66 WEST FLAGLER STREET UNIT PH-1			FEC Identification Number C	
City MIAMI	State FL	Zip Code 33130-1807	Amount of Each Disbursement this Period 20672.22	
Purpose of Disbursement DIGITAL ADVERTISING/VIDEO PRODUCTION/WEB		Category/ Type	Transaction ID : SB17.I18	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. RIGHTWAY COMPLIANCE LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2025	
Mailing Address 4075 LINGLESTOWN ROAD #119			FEC Identification Number C	
City HARRISBURG	State PA	Zip Code 17112	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement ACCOUNTING AND COMPLIANCE SERVICE		Category/ Type	Transaction ID : SB17.I19	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	30900.32
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 9		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Dan Innis for Senate**

Full Name (Last, First, Middle Initial) <b>A. RUBIX STRATEGIES</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025
Mailing Address 1001 LINCOLN AVENUE			FEC Identification Number C
City COLLEGE STATION	State TX	Zip Code 77840-2163	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement FUNDRAISING CONSULTING		Category/Type	Transaction ID : SB17.120
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	35900.32

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 9	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Dan Innis for Senate**

Full Name (Last, First, Middle Initial) <b>A. OLDS, LEONARD, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025
Mailing Address 100 LAKESHORE DRIVE		FEC Identification Number C
City NORTH PALM BEACH	State FL	Zip Code 33408
Purpose of Disbursement REFUND OF GENERAL ELECTION CONTRIBUTION		Amount of Each Disbursement this Period 3500.00
Candidate Name		Transaction ID : SB20A.115
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. OLDS, LEONARD, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2025
Mailing Address 100 LAKESHORE DRIVE		FEC Identification Number C
City NORTH PALM BEACH	State FL	Zip Code 33408
Purpose of Disbursement REFUND OF EXCESS CONTRIBUTION		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : SB20A.116
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6500.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Dan Innis for Senate**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Harris Media, LLC</b>			Nature of Debt (Purpose): Digital Advertising/Video Production/Web
Mailing Address 66 W Flagler St, Unit PH-1			
City Miami	State FL	Zip Code 33130	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="20672.22"/>	<b>Transaction ID : 54152554848</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="20672.22"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Rightway Compliance LLC</b>			Nature of Debt (Purpose): Accounting and Compliance Service
Mailing Address 4075 Linglestown Rd PMB 119			
City Harrisburg	State PA	Zip Code 17112	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="1750.00"/>	<b>Transaction ID : 25465768645</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="1750.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Rubix Strategies LLC</b>			Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 1001 Lincoln Ave			
City COLLEGE STATION	State TX	Zip Code 77840	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="5000.00"/>	<b>Transaction ID : 45655437</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="5000.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width:100%;" type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input style="width:100%;" type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input style="width:100%;" type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input style="width:100%;" type="text" value="0.00"/>