

**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.

12FE4M5

KEVIN MCCARTHY FOR CONGRESS

ADDRESS (number and street)

PO BOX 12667

Check if different
than previously
reported. (ACC)

BAKERSFIELD

CA

93389-2667

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00420935

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

CA

20

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
11 / 26 / 2024

through

M M / D D / Y Y Y Y
12 / 31 / 2024*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 THOMSON, JILL, , ,

Signature of Treasurer

THOMSON, JILL, , ,

Date

M M / D D / Y Y Y Y
01 / 31 / 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

KEVIN MCCARTHY FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 / 26 / 2024

To:

M M / D D / Y Y Y Y
12 / 31 / 2024

	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))	0.00	0.00
(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))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	31729.03	47251.21
(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))	31729.03	47251.21
8. Cash on Hand at Close of Reporting Period (from Line 27)	6235533.03	
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

KEVIN MCCARTHY FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 26 2024

To:

M M / D D / Y Y Y Y
12 31 2024**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).....

(ii) Unitemized

(iii) TOTAL of contributions
from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs)

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)15. OTHER RECEIPTS
(Dividends, Interest, etc.)16. **TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

19030.25

19030.25

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

33027.12

33027.12

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.....

31729.03

47251.21

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

5000.00

5000.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

36729.03

52251.21

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

6253231.81

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

19030.25

25. SUBTOTAL (add Line 23 and Line 24).....

6272262.06

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

36729.03

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

6235533.03

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 9

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

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NAME OF COMMITTEE (In Full)

KEVIN MCCARTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

CANTOR FITZGERALD

A.

Mailing Address 110 EAST 59TH STREET
21ST FLOORCity
NEW YORKState
NYZip Code
10022FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

32941.33

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	4

Transaction ID : A0636EC6D5A2F4294A2B

Amount of Each Receipt this Period

18970.86

☐ Memo Item
INTEREST INCOME

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

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

18970.86

18970.86

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

PAGE 6 OF 9

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

KEVIN MCCARTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BERKE FARAH LLPMailing Address 1200 NEW HAMPSHIRE AVE NW
SUITE 800City
WASHINGTONState
DCZip Code
20036-6805Purpose of Disbursement
LEGAL CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

7000.00

Transaction ID : B934ED0B5D4CB4F5E960

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CARDMEMBER SERVICE

Mailing Address PO BOX 94014

City
PALATINEState
ILZip Code
60094-4014Purpose of Disbursement
SEE MEMO ITEMS

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

206.48

Transaction ID : BB2A7F15C2AAA4586856

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VERIZON WIRELESS

Mailing Address PO BOX 25505

City
LEHIGH VALLEYState
PAZip Code
18002-5505Purpose of Disbursement
CELLULAR PHONE SERVICE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

272.80

Transaction ID : B12B43F2426CF46D88D0

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

7479.28

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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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

KEVIN MCCARTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CFS COMPLIANCE

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824-0844Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2020

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

15000.00

Transaction ID : B704C94F2BEC746079D7

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BERKE FARAH LLPMailing Address 1200 NEW HAMPSHIRE AVE NW
SUITE 800City
WASHINGTONState
DCZip Code
20036-6805Purpose of Disbursement
LEGAL CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7000.00

Transaction ID : B0E171A9A12AD4808BF8

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CARDMEMBER SERVICE

Mailing Address PO BOX 94014

City
PALATINEState
ILZip Code
60094-4014Purpose of Disbursement
SEE MEMO ITEMS

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

290.37

Transaction ID : BD05589CAB8DF487AB8F

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

22290.37

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 8 OF 9

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

KEVIN MCCARTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THOMSON, JILL, , ,

Mailing Address PO BOX 30844

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2024

City
BETHESDAState
MDZip Code
20824-0844

FEC Identification Number

C

Purpose of Disbursement
TREASURER SERVICES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B42EF09FEBA4D46EE8F3

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. CFS COMPLIANCE

Mailing Address PO BOX 30844

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		19		2024

City
BETHESDAState
MDZip Code
20824-0844

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1436.00

Transaction ID : B2F09FFD02A9443C9A3E

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

1936.00

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

31705.65

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

PAGE 9 OF 9

☐ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (In Full)

KEVIN MCCARTHY FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. THE MISSION AT KERN COUNTY

Mailing Address 816 E 21ST ST

City
BAKERSFIELDState
CAZip Code
93305-5243Purpose of Disbursement
CHARITABLE DONATION

012

Category/
Type

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B909CC71267524B399DB

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	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:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	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).....▶

5000.00

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

5000.00