

**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

Montavon for Congress

ADDRESS (number and street)

P.O. Box 17413

Check if different
than previously
reported. (ACC)

Sarasota

FL

34276

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00924787

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

17

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
08 / 18 / 2026in the
State of

FL

(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
07 / 01 / 2026

through

M M / D D / Y Y Y Y
07 / 29 / 2026*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 Mortazavi, Saied, , ,

Signature of Treasurer

Mortazavi, Saied, , ,

Date

M M / D D / Y Y Y Y
08 / 05 / 2026

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

Montavon for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	2	6

	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))....	5829.61	66436.41
(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))	5829.61	66436.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11916.92	75577.20
(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))	11916.92	75577.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	23859.21	
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)	33000.00	

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

Montavon for Congress

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2026

To:

MM / DD / YYYY
07 / 29 / 2026**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).....

3515.00

40100.00

(ii) Unitemized

2189.00

17769.91

(iii) TOTAL of contributions
from individuals ▶

5704.00

57869.91

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

125.61

8566.50

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

5829.61

66436.41

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

33000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

33000.00

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)..... ▶

5829.61

99436.41

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.....	11916.92	75577.20
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) ►	11916.92	75577.20

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	29946.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5829.61
25. SUBTOTAL (add Line 23 and Line 24).....	35776.13
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11916.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	23859.21

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 5 OF 29

☒ 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)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Boyle, Elizabeth, , ,

A.

Mailing Address 1265 Reserve Dr

City

Venice

State

FL

Zip Code

34285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Self Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

232.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 01 2026

Transaction ID : SA11AI.6684

Amount of Each Receipt this Period

182.50

☐ Memo Item

In-kind - Meals to Tiger Bay Jujne to August

Full Name (Last, First, Middle Initial)

Boyle, Elizabeth, , ,

B.

Mailing Address 1265 Reserve Dr

City

Venice

State

FL

Zip Code

34285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Self Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

332.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 14 2026

Transaction ID : SA11AI.6641

Amount of Each Receipt this Period

100.00

☐ Memo Item

Non Directed Earmark through ACTBLUE

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address 366 Summer St.

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8108.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 14 2026

Transaction ID : SA11AI.6641.0

Amount of Each Receipt this Period

100.00

☒ Memo Item

Conduit Memo

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

282.50

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 29

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Feser, Elizabeth, , ,

A.

Mailing Address 92 Rogers St

Unit 7

City

Branford

State

CT

Zip Code

06405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 15 2026

Transaction ID : SA11AI.6729

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ford, Kathleen, , ,

B.

Mailing Address 13701 Woodhaven Circle

City

Fort Myers

State

FL

Zip Code

33905

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unemployed

Occupation

Unemployed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 02 2026

Transaction ID : SA11AI.6632

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non Directed Earmark through ACTBLUE

Full Name (Last, First, Middle Initial)

ACTBLUE

C.

Mailing Address 366 Summer St.

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7880.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 02 2026

Transaction ID : SA11AI.6632.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO

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

1050.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Logan, Barbara, , ,

A.

Mailing Address 140 Pine Ave

City

Osprey

State

FL

Zip Code

34229

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
07 03 2026

Transaction ID : SA11AI.6730

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

McConnell, Judith, , ,

B.

Mailing Address 5229 Greenview Drive

City

Fort Collins

State

CO

Zip Code

80525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 08 2026

Transaction ID : SA11AI.6672

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Montavon, Michele, , ,

C.

Mailing Address 1216 Norwest Dr

City

Norwood

State

MA

Zip Code

02062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 10 2026

Transaction ID : SA11AI.6728

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1650.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Roach, Barbara, , ,

A. Mailing Address 422 Pinewood Lake Dr

City

Venice

State

FL

Zip Code

34285

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 ▼

1182.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 01 2026

Transaction ID : SA11AI.6687

Amount of Each Receipt this Period

182.50

☐ Memo Item

In-kind - Food - Meals to Tiger Bay June to Augsut

Full Name (Last, First, Middle Initial)

Roach, Barbara, , ,

B. Mailing Address 422 Pinewood Lake Dr

City

Venice

State

FL

Zip Code

34285

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 ▼

1432.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 17 2026

Transaction ID : SA11AI.6647

Amount of Each Receipt this Period

250.00

☐ Memo Item

Non Directed Earmark through ACTBLUE

Full Name (Last, First, Middle Initial)

ACTBLUE

C. Mailing Address 366 Summer St.

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8733.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 17 2026

Transaction ID : SA11AI.6647.0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Conduit Memo

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

432.50

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Spinner, Kathy, , ,

Mailing Address 1175 Tuscany Blvd

City
VeniceState
FLZip Code
34292FEC ID number of contributing
federal political committee.

C

Name of Employer
UnemployedOccupation
Unemployed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : SA11AI.6636

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non Directed Earmark through ACTBLUE

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address 366 Summer St.

City
SomervilleState
MAZip Code
02144FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8036.00

Date of Receipt

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

Transaction ID : SA11AI.6636.0

Amount of Each Receipt this Period

50.00

☒ Memo Item

CONDUIT MEMO

Full Name (Last, First, Middle Initial)

Steck, Pat, , ,

Mailing Address 1308 Old Stickney Point Rd, 2

City
SarasotaState
FLZip Code
34242FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

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

Transaction ID : SA11AI.6655

Amount of Each Receipt this Period

50.00

☐ Memo Item

Non Directed Earmark through ACTBLUE

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

100.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

ACTBLUE

A.

Mailing Address 366 Summer St.

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8994.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 22 2026

Transaction ID : SA11AI.6655.0

Amount of Each Receipt this Period

50.00



Memo Item

Conduit Memo

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period



Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

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)..... ▶

3515.00

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 11 OF 29

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Montavon, Matthew, , ,

A. Mailing Address P.O. Box 17413

City
Sarasota

State
FL

Zip Code
34276

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 ▼

41464.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 05 2026

Transaction ID : SA11D.6739

Amount of Each Receipt this Period

24.03

☐ Memo Item

In-kind - Travel/gas

Full Name (Last, First, Middle Initial)

Montavon, Matthew, , ,

B. Mailing Address P.O. Box 17413

City
Sarasota

State
FL

Zip Code
34276

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 ▼

41514.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 06 2026

Transaction ID : SA11D.6735

Amount of Each Receipt this Period

50.00

☐ Memo Item

In-kind - Table Sponsor

Full Name (Last, First, Middle Initial)

Montavon, Matthew, , ,

C. Mailing Address P.O. Box 17413

City
Sarasota

State
FL

Zip Code
34276

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 ▼

41541.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 16 2026

Transaction ID : SA11D.6741

Amount of Each Receipt this Period

26.58

☐ Memo Item

In-kind - Travel/gas

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

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

100.61

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

PAGE 12 OF 29

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Montavon, Matthew, , ,

A. Mailing Address P.O. Box 17413

City
SarasotaState
FLZip Code
34276FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

41566.50

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07		26		2026

Transaction ID : SA11D.6737

Amount of Each Receipt this Period

25.00

☐ Memo Item

In-kind - Cash to Harry for Travel reimbursement

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 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 Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

25.00
125.61

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address 366 Summer St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		05		2026

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C	C00401224
---	-----------

Purpose of Disbursement
Service Fee

003

Amount of Each Disbursement this Period

6.69

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID : SB17.5926

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address 366 Summer St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		12		2026

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C	C00401224
---	-----------

Purpose of Disbursement
Service Fee

003

Amount of Each Disbursement this Period

4.06

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID : SB17.5927

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

C. ACTBLUE

Mailing Address 366 Summer St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		19		2026

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C	C00401224
---	-----------

Purpose of Disbursement
Service Fee

003

Amount of Each Disbursement this Period

22.65

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID : SB17.5928

☐ Memo Item

State:

District:

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

33.40

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address 366 Summer St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		26		2026

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C C00401224

Purpose of Disbursement
Service Fee

003

Amount of Each Disbursement this Period

19.79

Transaction ID : SB17.5929

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. ACTBLUE

Mailing Address 366 Summer St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2026

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C C00401224

Purpose of Disbursement
Service Fee

003

Amount of Each Disbursement this Period

5.09

Transaction ID : SB17.5930

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Barthelemy, Harry, , ,

Mailing Address 1140 Cane Mill Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2026

City
BradentonState
FLZip Code
34212

FEC Identification Number

C

Purpose of Disbursement
General Campaign Consulting

001

Amount of Each Disbursement this Period

204.40

Transaction ID : SB17.5853

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

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

229.28

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Barthelemy, Harry, , ,

Mailing Address 1140 Cane Mill Lane

City
BradentonState
FLZip Code
34212Purpose of Disbursement
General Campaign Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.5854

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Barthelemy, Harry, , ,

Mailing Address 1140 Cane Mill Lane

City
BradentonState
FLZip Code
34212Purpose of Disbursement
Travel - gas reimbursement

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.5862

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Barthelemy, Harry, , ,

Mailing Address 1140 Cane Mill Lane

City
BradentonState
FLZip Code
34212Purpose of Disbursement
General Campaign Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.5865

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

3050.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Barthelemy, Harry, , ,

Mailing Address 1140 Cane Mill Lane

City
BradentonState
FLZip Code
34212Purpose of Disbursement
In kind - Travel/gas - reimbursement to staff

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.6747

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Costco Gas

Mailing Address 8201 Tamiami Trail

City
SarasotaState
FLZip Code
34238Purpose of Disbursement
IN-kind - travel gas

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

26.58

Transaction ID : SB17.6744

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Costco Gas

Mailing Address 8201 Tamiami Trail

City
SarasotaState
FLZip Code
34238Purpose of Disbursement
In-kind - Travel/gas

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.03

Transaction ID : SB17.6743

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. DAVIDSON, GENE, , ,

Mailing Address 4605 VIOLET AVE

City
SARASOTAState
FLZip Code
34233Purpose of Disbursement
General Campaign Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5867

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Advertising

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.5902

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Advertising

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.5903

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

1120.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Meta Way

Date of Disbursement

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

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Advertising

004

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.5908

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Meta Way

Date of Disbursement

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

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Advertising

004

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.5910

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Meta Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	2	6

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Advertising

004

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.5909

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

180.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Facebook

Mailing Address 1 Meta Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2026

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Advertising

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.5916

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Meta Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2026

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Advertising

004

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.5920

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Flywire Global

Mailing Address 14550 Beechnut St.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2026

City
HoustonState
TXZip Code
77083

FEC Identification Number

C

Purpose of Disbursement
Website services

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1289.52

Transaction ID : SB17.5856

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1409.52

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)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Hirsch, Alison, , ,

Mailing Address 15862 Blue Skies Dr

City
N. Fort MyersState
FLZip Code
33917Purpose of Disbursement
General Campaign consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.5859

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Imprint

Mailing Address 14550 Beechnut St

City
HoustonState
TXZip Code
77083Purpose of Disbursement
Pins

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

116.28

Transaction ID : SB17.5880

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jetsons Creative Trends

Mailing Address 2741 Osprey Avenue

City
SARASOTAState
FLZip Code
34234Purpose of Disbursement
Photography Services

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.5918

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

2416.28

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Jetsons Creative Trends

Mailing Address 2741 Osprey Avenue

City
SARASOTAState
FLZip Code
34234Purpose of Disbursement
Campaign event

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.5919

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Just, Amanda, , ,

Mailing Address P.O. Box 15254

City
SarasotaState
FLZip Code
34277Purpose of Disbursement
Travel - reimbursementCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

275.00

Transaction ID : SB17.5858

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Just, Amanda, , ,

Mailing Address P.O. Box 15254

City
SarasotaState
FLZip Code
34277Purpose of Disbursement
General Campaign Consulting

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.5866

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

1525.00

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)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Montavon, Matthew, , ,

Mailing Address P.O. Box 17413

City
SarasotaState
FLZip Code
34276Purpose of Disbursement
In-kind - Travel/gas

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.03

Transaction ID : SB17.6740

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Montavon, Matthew, , ,

Mailing Address P.O. Box 17413

City
SarasotaState
FLZip Code
34276Purpose of Disbursement
In-kind - Table Sponsor

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.6736

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Montavon, Matthew, , ,

Mailing Address P.O. Box 17413

City
SarasotaState
FLZip Code
34276Purpose of Disbursement
In-kind - Travel/gas

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

26.58

Transaction ID : SB17.6742

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

100.61

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: SB17

Transaction ID : SB17.6740

Payment to Costco for gas.

Form/Schedule:

Transaction ID:

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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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Montavon, Matthew, , ,

Mailing Address P.O. Box 17413

City
SarasotaState
FLZip Code
34276Purpose of Disbursement
In-kind - Cash to Harry for Travel reimbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.6738

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. North Port Chamber of Commerce

Mailing Address 14140 S. Tamiami Trail

City
North PortState
FLZip Code
34287Purpose of Disbursement
IN kind - Table Sponsor

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.6745

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SWFL Print

Mailing Address 1925 Trade Center Way

City
NaplesState
FLZip Code
34109Purpose of Disbursement
Palm Cards

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

705.62

Transaction ID : SB17.5882

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

730.62

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)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Tiger Bay

Mailing Address 6120 S Lockwood Ridge Rd

City
SarasotaState
FLZip Code
34231Purpose of Disbursement
In Kind - Food and beverage campaign event

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

182.50

Transaction ID : SB17.6748

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Tiger Bay

Mailing Address 6120 S Lockwood Ridge Rd

City
SarasotaState
FLZip Code
34231Purpose of Disbursement
IN Kind - food - Luncheons at Tiger Bay events.

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

182.50

Transaction ID : SB17.6750

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Web Network Solutions

Mailing Address 5335 Gate Pkwy

City
JacksonvilleState
FLZip Code
32256Purpose of Disbursement
Website Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

58.80

Transaction ID : SB17.5924

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

58.80

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

10853.51

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 26 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4111

Montavon for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Montavon, Matthew, , ,

Mailing Address

P.O. Box 17413

City

Sarasota

State

FL

ZIP Code

34276

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
10 10 2025

M M / D D / Y Y Y Y

D D / Y Y Y Y
Dec. 2026

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).....▶

10000.00

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

PAGE 27 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4112

Montavon for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Montavon, Matthew, , ,

Mailing Address

P.O. Box 17413

City

Sarasota

State

FL

ZIP Code

34276

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 30 / 2025

M M / D D / Y Y Y Y

D D / Y Y Y Y

Dec 2026

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).....▶

5000.00

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

PAGE 28 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4709

Montavon for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Montavon, Matthew, , ,

Mailing Address

P.O. Box 17413

City

Sarasota

State

FL

ZIP Code

34276

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 22 / 2026

M M / D D / Y Y Y Y

12/31/2026

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).....▶

10000.00

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

PAGE 29 OF 29

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.5819

Montavon for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Montavon, Matthew, , ,

Mailing Address

P.O. Box 17413

City

Sarasota

State

FL

ZIP Code

34276

☒ Personal Funds of the Candidate

Original Amount of Loan

8000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 12 / 2026

M M / D D / Y Y Y Y

D D / Y Y Y Y

Dec. 2026

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).....▶

8000.00

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

33000.00

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