

**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

SEAN KIRRANE FOR CONGRESS

ADDRESS (number and street)

395 FALETTI CIRCLE

Check if different
than previously
reported. (ACC)

RIVER VALE

NJ

07675

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00918342

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NJ

05

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 /

08

D D /

26

Y Y Y Y /

2025

through

M M /

12

D D /

31

Y Y Y Y /

2025

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

Type or Print Name of Treasurer

KIRRANE, SEAN, JOSEPH, ,

Signature of Treasurer

KIRRANE, SEAN, JOSEPH, ,

Date

M M /

04

D D /

15

Y Y Y Y /

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

SEAN KIRRANE FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	2	5

To:

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

	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))	3995.34	3995.34
(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))	3995.34	3995.34
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5025.59	5025.59
(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))	5025.59	5025.59
8. Cash on Hand at Close of Reporting Period (from Line 27)	3841.86	
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)	4872.11	

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

SEAN KIRrane FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
08 / 26 / 2025

To:

M M / D D / Y Y Y Y
12 / 31 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

3842.29

3842.29

(ii) Unitemized

52.05

52.05

(iii) TOTAL of contributions
from individuals ▶

3894.34

3894.34

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

101.00

101.00

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

3995.34

3995.34

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

4872.11

4872.11

(b) All Other Loans.....

0.00

0.00

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

4872.11

4872.11

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)..... ▶

8867.45

8867.45

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.....	5025.59	5025.59
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) ►	5025.59	5025.59

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	8867.45
25. SUBTOTAL (add Line 23 and Line 24).....	8867.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5025.59
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3841.86

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 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address 1603 CAPITOL AVENUE

SUITE 413-B562

City

CHEYENNE

State

WY

Zip Code

82001-4569

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3895.34

Date of Receipt

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

Transaction ID : SA11C.15

Amount of Each Receipt this Period

1041.02

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD**B.**

Full Name (Last, First, Middle Initial)

SOMMELIER, MIKE, , ,

Mailing Address 15391 LORRAINE WAY

City

IRVINE

State

CA

Zip Code

92604-3127

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

Name of Employer

Occupation

GLASSRATNER

CRO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

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

Transaction ID : SA11A.25

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 1603 CAPITOL AVENUE

SUITE 413-B562

City

CHEYENNE

State

WY

Zip Code

82001-4569

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3895.34

Date of Receipt

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

Transaction ID : SA11C.16

Amount of Each Receipt this Period

260.25

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ▶

1041.02

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)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

HOGAN, JOHN, , ,

A.

Mailing Address 30 REGENT DRIVE

City

SHREWSBURY

State

NJ

Zip Code

07702-4550

FEC ID number of contributing
federal political committee.

C

Name of Employer
WILENTZOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

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

Transaction ID : SA11A.24

Amount of Each Receipt this Period

260.25

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B562

City

CHEYENNE

State

WY

Zip Code

82001-4569

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3895.34

Date of Receipt

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

Transaction ID : SA11C.17

Amount of Each Receipt this Period

1000.00

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

C.

Full Name (Last, First, Middle Initial)

JOHNSON, JOSEPHINE, , ,

Mailing Address 15 SOUTH 11TH STREET

City

NEW HYDE PARK

State

NY

Zip Code

11040-4826

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	2	5

Transaction ID : SA11A.23

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

1260.25

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)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address 1603 CAPITOL AVENUE

SUITE 413-B562

City

CHEYENNE

State

WY

Zip Code

82001-4569

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3895.34

Date of Receipt

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

Transaction ID : SA11C.18

Amount of Each Receipt this Period

1041.02

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD**B.**

Full Name (Last, First, Middle Initial)

DOWLING, ANNE, , ,

Mailing Address 38 HILLTOP ROAD

City

KINNELON

State

NJ

Zip Code

07405-2183

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

Name of Employer

Occupation

RETIRED

SCHOOL PRINCIPAL

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

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

Transaction ID : SA11A.22

Amount of Each Receipt this Period

1041.02

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 1603 CAPITOL AVENUE

SUITE 413-B562

City

CHEYENNE

State

WY

Zip Code

82001-4569

FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3895.34

Date of Receipt

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

Transaction ID : SA11C.19

Amount of Each Receipt this Period

501.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ▶

1041.02

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
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERTS, MARK, , ,

A.

Mailing Address 12501 S GRANITE AVE E

City
BIXBYState
OKZip Code
74008-2770FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF OKLAHOMAOccupation
ADJUNCT PROFESSOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
09		10		2025

Transaction ID : SA11A.21

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

EARMARKED FROM WINRED

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)..... ▶

500.00
3842.29

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 9 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

KIRrane, SEAN, JOSEPH, ,

A. Mailing Address 395 FALETTI CIRCLE

City
RIVER VALE

State
NJ

Zip Code
07675

FEC ID number of contributing
federal political committee.

C H6NJ05221

Name of Employer
SELF-EMPLOYED

Occupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4872.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2025

Transaction ID : SA13A.1

Amount of Each Receipt this Period

4442.11

☐ Memo Item

LOAN FROM THE CANDIDATE

Full Name (Last, First, Middle Initial)

KIRrane, SEAN, JOSEPH, ,

B. Mailing Address 395 FALETTI CIRCLE

City
RIVER VALE

State
NJ

Zip Code
07675

FEC ID number of contributing
federal political committee.

C H6NJ05221

Name of Employer
SELF-EMPLOYED

Occupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4872.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2025

Transaction ID : SA13A.3

Amount of Each Receipt this Period

130.00

☐ Memo Item

LOAN FROM THE CANDIDATE

Full Name (Last, First, Middle Initial)

KIRrane, SEAN, JOSEPH, ,

C. Mailing Address 395 FALETTI CIRCLE

City
RIVER VALE

State
NJ

Zip Code
07675

FEC ID number of contributing
federal political committee.

C H6NJ05221

Name of Employer
SELF-EMPLOYED

Occupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4872.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 10 / 2025

Transaction ID : SA13A.4

Amount of Each Receipt this Period

300.00

☐ Memo Item

LOAN FROM THE CANDIDATE

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

4872.11

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

4872.11

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

PAGE 10 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRRANE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 96001

City
LOS ANGELESState
CAZip Code
90096Purpose of Disbursement
CREDIT CARD PAYMENT

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
12		31		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1299.36

Transaction ID : SB17.1036

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		05		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

4.00

Transaction ID : SB17.1003

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		05		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

3.00

Transaction ID : SB17.1004

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

1299.36

TOTAL 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 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)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2025

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.1005

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2025

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.1006

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2025

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.1007

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

0.00

TOTAL 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 PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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	1		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.00

Transaction ID : SB17.1008

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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	1		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.1009

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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	1		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.1010

☒ 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 DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.1011

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.1012

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2025

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6.00

Transaction ID : SB17.1013

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

0.00

TOTAL 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 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)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

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

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

7.00

Transaction ID : SB17.1014

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

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

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

9.00

Transaction ID : SB17.1015

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

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

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

8.00

Transaction ID : SB17.1016

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

0.00

TOTAL 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 PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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	1		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

11.00

Transaction ID : SB17.1017

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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	1		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17.1018

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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	1		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.00

Transaction ID : SB17.1019

☒ 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
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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	1		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.1020

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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	1		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

17.00

Transaction ID : SB17.1021

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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	1		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.00

Transaction ID : SB17.1022

☒ 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 DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		13		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

21.00

Transaction ID : SB17.1023

☒ Memo Item**B. FACEBOOK**

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		14		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

23.00

Transaction ID : SB17.1026

☒ Memo Item**C. FACEBOOK**

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.1027

☒ 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 DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		16		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

15.53

Transaction ID : SB17.1028

☒ Memo Item**B. FACEBOOK**

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		17		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

28.00

Transaction ID : SB17.1030

☒ Memo Item**C. FACEBOOK**

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		19		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

31.00

Transaction ID : SB17.1031

☒ 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 DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		20		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

34.00

Transaction ID : SB17.1032

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		22		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

37.00

Transaction ID : SB17.1033

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FACEBOOK

Mailing Address 1 HACKER WAY

City
MENLO PARKState
CAZip Code
94025Purpose of Disbursement
DIGITAL SVC

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
11		24		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.1034

☒ 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
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1 HACKER WAY

Date of Disbursement

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

City
MENLO PARKState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SVC

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

37.09

Transaction ID : SB17.1035

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. GODADDY

Mailing Address 100 SOUTH ML AVE

Date of Disbursement

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

City
TEMPEState
AZZip Code
85281

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

95.76

Transaction ID : SB17.1001

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. GODADDY

Mailing Address 100 SOUTH ML AVE

Date of Disbursement

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

City
TEMPEState
AZZip Code
85281

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

24.18

Transaction ID : SB17.1002

☒ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 30

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

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GODADDY

Mailing Address 100 SOUTH ML AVE

City
TEMPEState
AZZip Code
85281Purpose of Disbursement
SUBSCRIPTION

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	1		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

202.04

Transaction ID : SB17.1024

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY

Mailing Address 100 SOUTH ML AVE

City
TEMPEState
AZZip Code
85281Purpose of Disbursement
SUBSCRIPTION

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	1		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

71.88

Transaction ID : SB17.1025

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SITEGROUND HOSTING

Mailing Address 700 NORTH FAIRFAX ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
SUBSCRIPTION

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	1		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

59.88

Transaction ID : SB17.1029

☒ 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 DISBURSEMENTS**Use 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)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. X CORP

Mailing Address 1355 MARKET ST

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
SUBSCRIPTION

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
10		05		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

395.00

Transaction ID : SB17.1000

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address PO BOX 15019

City
WILMINGTONState
DEZip Code
19850Purpose of Disbursement
CREDIT CARD PAYMENT

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
12		31		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

3142.75

Transaction ID : SB17.1052

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GODADDY

Mailing Address 100 SOUTH ML AVE

City
TEMPEState
AZZip Code
85281Purpose of Disbursement
SUBSCRIPTION

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
08		25		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

12.19

Transaction ID : SB17.1047

☒ Memo Item

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

3142.75

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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(check only one)

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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GODADDY

Mailing Address 100 SOUTH ML AVE

City
TEMPEState
AZZip Code
85281Purpose of Disbursement
SUBSCRIPTION

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
0	8		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

97.12

Transaction ID : SB17.1048

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY

Mailing Address 100 SOUTH ML AVE

City
TEMPEState
AZZip Code
85281Purpose of Disbursement
SUBSCRIPTION

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
0	8		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

48.76

Transaction ID : SB17.1049

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. GODADDY

Mailing Address 100 SOUTH ML AVE

City
TEMPEState
AZZip Code
85281Purpose of Disbursement
SUBSCRIPTION

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
0	8		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

48.76

Transaction ID : SB17.1050

☒ 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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NAME OF COMMITTEE (In Full)

SEAN KIRRANE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LIVE LOVE LAUGH PHOTO

Mailing Address 580 N MAPLE AVE

City
RidgewoodState
NJZip Code
07450Purpose of Disbursement
PHOTOGRAPHY SVC

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	0		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2345.75

Transaction ID : SB17.1045

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. NATIONBUILDER

Mailing Address 520 N GRAND AVE

City
LOS ANGELESState
CAZip Code
90071Purpose of Disbursement
SUBSCRIPTION

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
0	9		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

408.00

Transaction ID : SB17.1046

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. VERCEL INC.

Mailing Address 440 N BARRANCA AVE

City
COVINAState
CAZip Code
91723Purpose of Disbursement
SUBSCRIPTION

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	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.1044

☒ 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 DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WDAY

Mailing Address 6110 STONERIDGE MALL RD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	2	5

City
PLEASANTONState
CAZip Code
94588

FEC Identification Number

C

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

162.17

Transaction ID : SB17.1051

☒ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLC

Mailing Address 1603 CAPITOL AVE, STE 413-B561

Date of Disbursement

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

City
CHEYENNEState
WYZip Code
82001

FEC Identification Number

C

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2.05

Transaction ID : SB17.1108

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLC

Mailing Address 1603 CAPITOL AVE, STE 413-B561

Date of Disbursement

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

City
CHEYENNEState
WYZip Code
82001

FEC Identification Number

C

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

41.02

Transaction ID : SB17.1109

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

43.07

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

SEAN KIRRANE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLC

Mailing Address 1603 CAPITOL AVE, STE 413-B561

City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.25

Transaction ID : SB17.1110

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES LLC

Mailing Address 1603 CAPITOL AVE, STE 413-B561

City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : SB17.1111

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES LLC

Mailing Address 1603 CAPITOL AVE, STE 413-B561

City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

41.02

Transaction ID : SB17.1112

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

90.67

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)

SEAN KIRrane FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES LLC

Mailing Address 1603 CAPITOL AVE, STE 413-B561

City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
CREDIT CARD PROCESSING FEES

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
0	9		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.74

Transaction ID : SB17.1112_B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PASSAIC COUNTY REGULAR REPUBLICANS

Mailing Address 1220 HAMBURG TURNPIKE

City
WAYNEState
NJZip Code
07470Purpose of Disbursement
REGISTRATION FEE

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	1		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.1040

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SUSSEX COUNTY REGULAR REPUBLICAN COMMITTEE

Mailing Address PO BOX 425

City
NEWTONState
NJZip Code
07860Purpose of Disbursement
REGISTRATION FEE

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	0		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

130.00

Transaction ID : SB17.1039

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

449.74

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

5025.59

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

PAGE 28 OF 30

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.3

SEAN KIRRANE FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

KIRRANE, SEAN, JOSEPH, ,

Mailing Address

395 FALETTI CIRCLE

City

RIVER VALE

State

NJ

ZIP Code

07675

☒ Personal Funds of the Candidate

Original Amount of Loan

130.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

130.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
10 / 21 / 2025

M M / D D / Y Y Y Y

D D / Y Y Y Y

N/A

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).....▶

130.00

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 30

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.4

SEAN KIRRANE FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

395 FALETTI CIRCLE

City

RIVER VALE

State

NJ

ZIP Code

07675

☒ Personal Funds of the Candidate

Original Amount of Loan

300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

300.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
11 10 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

300.00

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 30 OF 30

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1

SEAN KIRRANE FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

395 FALETTI CIRCLE

City

RIVER VALE

State

NJ

ZIP Code

07675

☒ Personal Funds of the Candidate

Original Amount of Loan

4442.11

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4442.11

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 31 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y
N/A

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).....▶

4442.11

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

4872.11

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