

FEC  
FORM 3REPORT 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

Boozman for Arkansas

ADDRESS (number and street)

PO Box 671

Check if different  
than previously  
reported. (ACC)

Rogers

AR

72757

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00476317

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

AR

00

## 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 10

/ D 01

/ Y 2025

through

M 12

/ D 31

/ Y 2025

Date

M 01

/ D 27

/ Y 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 KOCH, TIMOTHY, A., ,

Signature of Treasurer

KOCHE, TIMOTHY, A., ,

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  
OnlyFEC FORM 3  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Boozman for Arkansas**

Report Covering the Period: From:

M	M	10	/	D	D	01	/	Y	Y	Y	Y
---	---	----	---	---	---	----	---	---	---	---	---

To:

M	M	12	/	D	D	31	/	Y	Y	Y	Y
---	---	----	---	---	---	----	---	---	---	---	---

**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)) ....
- (b) Total Contribution Refunds  
(from Line 20(d)) .....
- (c) Net Contributions (other than loans)  
(subtract Line 6(b) from Line 6(a)) .....

68209.16	849778.64
0.00	2100.00
68209.16	847678.64

**7. Net Operating Expenditures**

- (a) Total Operating Expenditures  
(from Line 17) .....
- (b) Total Offsets to Operating  
Expenditures (from Line 14).....
- (c) Net Operating Expenditures  
(subtract Line 7(b) from Line 7(a)) .....

50136.65	665375.32
0.00	1100.25
50136.65	664275.07

**8. Cash on Hand at Close of  
Reporting Period (from Line 27).....**

1223722.63
------------

**9. Debts and Obligations Owed **TO**  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....**

0.00
------

**10. Debts and Obligations Owed **BY**  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....**

0.00
------

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

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Boozman for Arkansas

Report Covering the Period: From:

MM 10 / DD 01 / YY 2025

To:

MM 12 / DD 31 / YY 2025

## I. RECEIPTS

COLUMN A  
Total This PeriodCOLUMN B  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

- (a) Individuals/Persons Other Than Political Committees
  - (i) Itemized (use Schedule A) .....
  - (ii) Unitemized .....
  - (iii) TOTAL of contributions from individuals .....
- (b) Political Party Committees .....
- (c) Other Political Committees (such as PACs) .....
- (d) The Candidate .....
- (e) TOTAL CONTRIBUTIONS (other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d)) .....

23075.00	244261.50
134.16	24117.14
23209.16	268378.64
0.00	0.00
45000.00	581400.00
0.00	0.00
68209.16	849778.64
0.00	83568.38

## 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....

## 13. LOANS:

- (a) Made or Guaranteed by the Candidate .....
- (b) All Other Loans .....
- (c) TOTAL LOANS  
(add Lines 13(a) and (b)) .....

0.00	0.00
0.00	0.00
0.00	0.00

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

0.00	1100.25
7701.11	66174.64
75910.27	1000621.91

## 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.....	50136.65	665375.32
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	2100.00
(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	2100.00
21. OTHER DISBURSEMENTS .....	0.00	177900.00
<b>22. TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	<b>50136.65</b>	<b>845375.32</b>

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1197949.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	75910.27
25. SUBTOTAL (add Line 23 and Line 24).....	1273859.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	50136.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1223722.63

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

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

FOR LINE NUMBER: PAGE 5 OF 50

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Boozman for Arkansas

<p>Full Name (Last, First, Middle Initial) MOORE, WILLIAM, , ,</p> <p><b>A.</b> Mailing Address 117 HILLCREST RD</p> <p>City RALEIGH      State NC      Zip Code 27605-1717</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer ELEANOR CROOK FOUNDATION      Occupation CEO</p> <p>Receipt For: 2028      Election Cycle-to-Date ▼</p> <p><input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General Other (specify) ▼</p>		<p>Date of Receipt M M / D D / Y Y Y Y 12      16      2025</p> <p><b>Transaction ID : SA11A.74418</b></p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Memo Item <b>CONTRIBUTION</b></p>
<p>Full Name (Last, First, Middle Initial) <b>BLOUNT STRATEGIC INITIATIVES LLC</b></p> <p><b>B.</b> Mailing Address 110 D STREET, SE APT 214</p> <p>City WASHINGTON      State DC      Zip Code 20003-1813</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer      Occupation</p> <p>Receipt For: 2028      Election Cycle-to-Date ▼</p> <p><input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General Other (specify) ▼</p>		<p>Date of Receipt M M / D D / Y Y Y Y 12      30      2025</p> <p><b>Transaction ID : SA11A.74473</b></p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Memo Item <b>CONTRIBUTION</b></p> <p><b>SEE ATTRIBUTION BELOW</b></p>
<p>Full Name (Last, First, Middle Initial) <b>BLOUNT, JOHN, B., , JR.</b></p> <p><b>C.</b> Mailing Address 110 D STREET SE SUITE 214</p> <p>City WASHINGTON      State DC      Zip Code 20003-1813</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer BLOUNT STRATEGIC INITIATIVES      Occupation CEO</p> <p>Receipt For: 2028      Election Cycle-to-Date ▼</p> <p><input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General Other (specify) ▼</p>		<p>Date of Receipt M M / D D / Y Y Y Y 12      30      2025</p> <p><b>Transaction ID : SA11A.74509</b></p> <p>Amount of Each Receipt this Period 500.00</p> <p><input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b></p> <p><b>PARTNERSHIP ATTRIBUTION</b></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ►</p> <p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>		<p>1500.00</p>

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

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

FOR LINE NUMBER: PAGE 6 OF 50

(check only one)

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

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

 Full Name (Last, First, Middle Initial)  
**COLORADO RIVER INDIAN TRIBES**

Mailing Address 26600 MOHAVE ROAD

 City      State      Zip Code  
 PARKER      AZ      85344-7737

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer      Occupation

Receipt For: 2028

 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11A.74492

Amount of Each Receipt this Period

2000.00

Memo Item

CONTRIBUTION

 Full Name (Last, First, Middle Initial)  
**MORONGO BAND OF MISSION INDIANS**

Mailing Address 12700 PUMARRA RD

 City      State      Zip Code  
 BANNING      CA      92220-6977

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer      Occupation

Receipt For: 2028

 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : SA11A.74474

Amount of Each Receipt this Period

2000.00

Memo Item

CONTRIBUTION

 Full Name (Last, First, Middle Initial)  
**WINRED**

Mailing Address PO BOX 9891

 City      State      Zip Code  
 ARLINGTON      VA      22219-1891

 FEC ID number of contributing  
 federal political committee.

C C00694323

Name of Employer      Occupation

Receipt For: 2028

 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

187883.10

Date of Receipt

 M M / D D / Y Y Y Y  
 10      05      2025

Transaction ID : SA11C.73124

Amount of Each Receipt this Period

25.03

Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

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

4000.00

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: PAGE 7 OF 50

(check only one)

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

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>OVERHOLT, KEVIN, , ,</b> <b>A.</b> Mailing Address P.O. BOX 555		Date of Receipt M M / D D / Y Y Y Y 10 05 2025 <b>Transaction ID : SA11A.73125</b>
City <b>LESLIE</b>  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00  <input type="checkbox"/> Memo Item <b>CONTRIBUTION</b> <b>EARMARKED FROM WINRED</b>
Name of Employer <b>SWPA</b>  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation <b>HEAVY EQUIPMENT OPERATOR</b>  Election Cycle-to-Date ▼ <b>925.00</b>
Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>B.</b> Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 10 20 2025 <b>Transaction ID : SA11C.73161</b>
City <b>ARLINGTON</b>  FEC ID number of contributing federal political committee. <b>C C00694323</b>		Amount of Each Receipt this Period 14000.00  <input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b> <b>SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD</b>
Name of Employer  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation  Election Cycle-to-Date ▼ <b>187883.10</b>
Full Name (Last, First, Middle Initial) <b>BARNES, ADRIAN, , ,</b> <b>C.</b> Mailing Address 5514 LAKE RIDGE TER		Date of Receipt M M / D D / Y Y Y Y 10 20 2025 <b>Transaction ID : SA11A.73163</b>
City <b>BOWIE</b>  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 7000.00  <input type="checkbox"/> Memo Item <b>CONTRIBUTION</b> <b>EARMARKED FROM WINRED</b>
Name of Employer <b>OS STRATEGIES</b>  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation <b>PARTNER</b>  Election Cycle-to-Date ▼ <b>0.00</b>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		
<b>TOTAL</b> 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: PAGE 8 OF 50

(check only one)

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

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>BARNES, ADRIAN, , ,</b> <b>A.</b> Mailing Address 5514 LAKE RIDGE TER		Date of Receipt M M / D D / Y Y Y Y 10 20 2025 <b>Transaction ID : SA11A.74281</b>
City <b>BOWIE</b>  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  - 7000.00  Memo Item <b>CONTRIBUTION</b> <b>EARMARKED BY WINRED - CHARGED BACK</b>
Name of Employer <b>OS STRATEGIES</b>  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation <b>PARTNER</b>  Election Cycle-to-Date ▼  0.00
Full Name (Last, First, Middle Initial) <b>SHAHMORADI, HEIDEH, , ,</b> <b>B.</b> Mailing Address 5514 LAKE RIDGE TER		Date of Receipt M M / D D / Y Y Y Y 10 20 2025 <b>Transaction ID : SA11A.73162</b>
City <b>BOWIE</b>  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  7000.00  Memo Item <b>CONTRIBUTION</b> <b>EARMARKED FROM WINRED; SEE REDESIGNATION</b>
Name of Employer <b>O'KEEFFE SHAHMORADI STRATEGIES</b>  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation <b>PARTNER</b>  Election Cycle-to-Date ▼  7000.00
Full Name (Last, First, Middle Initial) <b>SHAHMORADI, HEIDEH, , ,</b> <b>C.</b> Mailing Address 5514 LAKE RIDGE TER		Date of Receipt M M / D D / Y Y Y Y 10 20 2025 <b>Transaction ID : SA11A.74532</b>
City <b>BOWIE</b>  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  - 3500.00  Memo Item <b>CONTRIBUTION</b> <b>REDESIGNATION TO GENERAL</b>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		 0.00
<b>TOTAL</b> 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: PAGE 9 OF 50

(check only one)

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

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>SHAHMORADI, HEIDEH, , ,</b> <b>A.</b> Mailing Address 5514 LAKE RIDGE TER		Date of Receipt M M / D D / Y Y Y Y 10 20 2025 <b>Transaction ID : SA11A.74533</b>
City <b>BOWIE</b>  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 3500.00
Name of Employer <b>O'KEEFFE SHAHMORADI STRATEGIES</b>  Receipt For: 2028 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation <b>PARTNER</b>  Election Cycle-to-Date ▼ 7000.00
Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>B.</b> Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 11 02 2025 <b>Transaction ID : SA11C.74290</b>
City <b>ARLINGTON</b>  FEC ID number of contributing federal political committee. <b>C C00694323</b>		Amount of Each Receipt this Period 2000.00
Name of Employer  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation  Election Cycle-to-Date ▼ 187883.10
Full Name (Last, First, Middle Initial) <b>SALEM, NAVYN, , ,</b> <b>C.</b> Mailing Address 41 NAYATT ROAD		Date of Receipt M M / D D / Y Y Y Y 11 02 2025 <b>Transaction ID : SA11A.74291</b>
City <b>BARRINGTON</b>  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer <b>EDESIA NUTRITION</b>  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation <b>CEO</b>  Election Cycle-to-Date ▼ 2000.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		2000.00
<b>TOTAL</b> This Period (last page this line number only) .....		2000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 50

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
15			

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>A.</b> Mailing Address PO BOX 9891		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>11</td><td></td><td></td><td>05</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : SA11C.74304	M	M	/	D	D	/	Y	Y	Y	Y	11			05			2025				
M	M	/	D	D	/	Y	Y	Y	Y														
11			05			2025																	
City <b>ARLINGTON</b>		State <b>VA</b>	Zip Code <b>22219-1891</b>																				
FEC ID number of contributing federal political committee.		<b>C</b> C00694323																					
Name of Employer		Occupation																					
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <div style="text-align: right; border: 1px solid gray; padding: 2px; display: inline-block;">187883.10</div>																					
Full Name (Last, First, Middle Initial) <b>OVERHOLT, KEVIN, , ,</b> <b>B.</b> Mailing Address P.O. BOX 555																							
City <b>LESLIE</b>		State <b>AR</b>	Zip Code <b>72645-0555</b>																				
FEC ID number of contributing federal political committee.		<b>C</b>																					
Name of Employer <b>SWPA</b>		Occupation <b>HEAVY EQUIPMENT OPERATOR</b>																					
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <div style="text-align: right; border: 1px solid gray; padding: 2px; display: inline-block;">925.00</div>																					
Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>C.</b> Mailing Address PO BOX 9891																							
City <b>ARLINGTON</b>		State <b>VA</b>	Zip Code <b>22219-1891</b>																				
FEC ID number of contributing federal political committee.		<b>C</b> C00694323																					
Name of Employer		Occupation																					
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <div style="text-align: right; border: 1px solid gray; padding: 2px; display: inline-block;">187883.10</div>																					
SUBTOTAL of Receipts This Page (optional)..... ►																							
TOTAL This Period (last page this line number only) ..... ►																							
Amount of Each Receipt this Period <div style="text-align: right; border: 1px solid gray; padding: 2px; display: inline-block;">25.13</div>																							
<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>																							
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD																							
Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>11</td><td></td><td></td><td>05</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : SA11A.74305				M	M	/	D	D	/	Y	Y	Y	Y	11			05			2025			
M	M	/	D	D	/	Y	Y	Y	Y														
11			05			2025																	
Amount of Each Receipt this Period <div style="text-align: right; border: 1px solid gray; padding: 2px; display: inline-block;">25.00</div>																							
<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b> <b>EARMARKED FROM WINRED</b>																							
Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>11</td><td></td><td></td><td>18</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : SA11C.74332				M	M	/	D	D	/	Y	Y	Y	Y	11			18			2025			
M	M	/	D	D	/	Y	Y	Y	Y														
11			18			2025																	
Amount of Each Receipt this Period <div style="text-align: right; border: 1px solid gray; padding: 2px; display: inline-block;">1000.20</div>																							
<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>																							
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD																							
<div style="text-align: right; border: 1px solid gray; padding: 2px; display: inline-block;">25.00</div>																							
<div style="text-align: right; border: 1px solid gray; padding: 2px; display: inline-block;">25.00</div>																							

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

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

FOR LINE NUMBER: PAGE 11 OF 50

(check only one)

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 12   13a   13b   14   15

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>OKEEFFE, JAMES, , ,</b> <b>A.</b> Mailing Address 3128 OLIVER ST NW		Date of Receipt M M / D D / Y Y Y Y 11 18 2025 <b>Transaction ID : SA11A.74333</b>
City WASHINGTON      State DC      Zip Code 20015-		Amount of Each Receipt this Period  1000.00
FEC ID number of contributing federal political committee. <b>C</b>		 Memo Item <b>CONTRIBUTION</b> <b>EARMARKED FROM WINRED</b>
Name of Employer <b>OKEEFFE SHAHMORADI STRATEGIES</b>	Occupation <b>CONSULTANT</b>	
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>B.</b> Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 11 24 2025 <b>Transaction ID : SA11C.74338</b>
City ARLINGTON      State VA      Zip Code 22219-1891		Amount of Each Receipt this Period  1000.57
FEC ID number of contributing federal political committee. <b>C C00694323</b>		 Memo Item <b>CONTRIBUTION</b> <b>SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD</b>
Name of Employer		
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼  187883.10	
Full Name (Last, First, Middle Initial) <b>ROBINSON, MICHAEL, , ,</b> <b>C.</b> Mailing Address 402 13TH ST SE		Date of Receipt M M / D D / Y Y Y Y 11 24 2025 <b>Transaction ID : SA11A.74340</b>
City WASHINGTON      State DC      Zip Code 20003-2490		Amount of Each Receipt this Period  1000.00
FEC ID number of contributing federal political committee. <b>C</b>		 Memo Item <b>CONTRIBUTION</b> <b>EARMARKED FROM WINRED</b>
Name of Employer <b>MEHLMAN CONSULTING</b>	Occupation <b>LOBBYIST</b>	
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼  1000.00	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		 2000.00
<b>TOTAL</b> This Period (last page this line number only) .....		 2000.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

<b>A.</b> Full Name (Last, First, Middle Initial) <b>WINRED</b> Mailing Address PO BOX 9891		Date of Receipt <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> </div> <div style="text-align: center;"> <b>12</b>      <b>08</b>      <b>2025</b> </div> </div> <b>Transaction ID : SA11C.74387</b>	
City <b>ARLINGTON</b>		State <b>VA</b>	Zip Code <b>22219-1891</b>
FEC ID number of contributing federal political committee.		<b>C</b> <input type="text" value="C00694323"/>	
Name of Employer		Occupation	
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <div style="border: 1px solid gray; padding: 2px; display: inline-block;"> <b>187883.10</b> </div>	
Full Name (Last, First, Middle Initial) <b>CALVERT CAMPBELL, KARA, , ,</b> <b>B.</b> Mailing Address 3683 NORTH HARRISON STREET			
City <b>ARLINGTON</b>		State <b>VA</b>	Zip Code <b>22207-1843</b>
FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>	
Name of Employer <b>COINBASE</b>		Occupation <b>SR. DIR, US POLICY</b>	
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <div style="border: 1px solid gray; padding: 2px; display: inline-block;"> <b>3500.00</b> </div>	
Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>C.</b> Mailing Address PO BOX 9891			
City <b>ARLINGTON</b>		State <b>VA</b>	Zip Code <b>22219-1891</b>
FEC ID number of contributing federal political committee.		<b>C</b> <input type="text" value="C00694323"/>	
Name of Employer		Occupation	
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <div style="border: 1px solid gray; padding: 2px; display: inline-block;"> <b>187883.10</b> </div>	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►			
<b>TOTAL</b> This Period (last page this line number only) ..... ►			
Date of Receipt <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> </div> <div style="text-align: center;"> <b>12</b>      <b>10</b>      <b>2025</b> </div> </div> <b>Transaction ID : SA11C.74399</b>			
Amount of Each Receipt this Period <div style="border: 1px solid gray; padding: 2px; display: inline-block;"> <b>3500.00</b> </div>			
<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>			
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD			
Date of Receipt <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> </div> <div style="text-align: center;"> <b>12</b>      <b>08</b>      <b>2025</b> </div> </div> <b>Transaction ID : SA11A.74388</b>			
Amount of Each Receipt this Period <div style="border: 1px solid gray; padding: 2px; display: inline-block;"> <b>3500.00</b> </div>			
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<b>EARMARKED FROM WINRED</b>			
Date of Receipt <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> </div> <div style="text-align: center;"> <b>12</b>      <b>10</b>      <b>2025</b> </div> </div> <b>Transaction ID : SA11C.74399</b>			
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<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>			
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►			
<b>TOTAL</b> This Period (last page this line number only) ..... ►			

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

 Use separate schedule(s)  
 for each category of the  
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 12      13a   13b   14      15

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>OVERHOLT, KEVIN, , ,</b> <b>A.</b> Mailing Address P.O. BOX 555		Date of Receipt M M / D D / Y Y Y Y 12 10 2025 <b>Transaction ID : SA11A.74401</b>
City <b>LESLIE</b>  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00  <input type="checkbox"/> Memo Item <b>CONTRIBUTION</b> <b>EARMARKED FROM WINRED</b>
Name of Employer <b>SWPA</b>  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation <b>HEAVY EQUIPMENT OPERATOR</b>  Election Cycle-to-Date ▼ <b>925.00</b>
Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>B.</b> Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 12 15 2025 <b>Transaction ID : SA11C.74414</b>
City <b>ARLINGTON</b>  FEC ID number of contributing federal political committee. <b>C C00694323</b>		Amount of Each Receipt this Period 500.06  <input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b> <b>SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD</b>
Name of Employer  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation  Election Cycle-to-Date ▼ <b>187883.10</b>
Full Name (Last, First, Middle Initial) <b>ROGERS, ANDREW, , ,</b> <b>C.</b> Mailing Address 999 E STREET NW, SUITE 600		Date of Receipt M M / D D / Y Y Y Y 12 15 2025 <b>Transaction ID : SA11A.74417</b>
City <b>WASHINGTON</b>  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00  <input type="checkbox"/> Memo Item <b>CONTRIBUTION</b> <b>EARMARKED FROM WINRED</b>
Name of Employer <b>BOUNDARY STONE PARTNERS</b>  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation <b>MANAGING PARTNER</b>  Election Cycle-to-Date ▼ <b>500.00</b>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		
<b>TOTAL</b> 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: PAGE 14 OF 50

(check only one)

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>A.</b> Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 12 22 2025 <b>Transaction ID : SA11C.74439</b>
City <b>ARLINGTON</b> State <b>VA</b> Zip Code <b>22219-1891</b>		Amount of Each Receipt this Period 500.20
FEC ID number of contributing federal political committee. <b>C C00694323</b>		<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer		Occupation
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <b>187883.10</b>
Full Name (Last, First, Middle Initial) <b>GRAAB, ALISON, ,</b> <b>B.</b> Mailing Address 6905 WILSON LANE		Date of Receipt M M / D D / Y Y Y Y 12 22 2025 <b>Transaction ID : SA11A.74441</b>
City <b>BETHESDA</b> State <b>MD</b> Zip Code <b>20817-4923</b>		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>ALPINE GROUP</b>		Occupation <b>SENIOR VICE PRESIDENT</b>
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <b>500.00</b>
Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>C.</b> Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 12 27 2025 <b>Transaction ID : SA11C.74452</b>
City <b>ARLINGTON</b> State <b>VA</b> Zip Code <b>22219-1891</b>		Amount of Each Receipt this Period 1000.11
FEC ID number of contributing federal political committee. <b>C C00694323</b>		<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer		Occupation
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ <b>187883.10</b>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		500.00
<b>TOTAL</b> This Period (last page this line number only) .....		500.00

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

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

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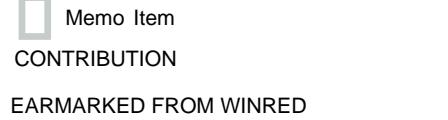
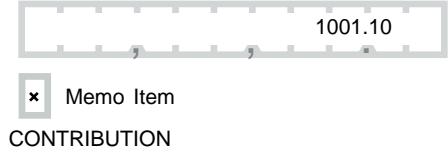
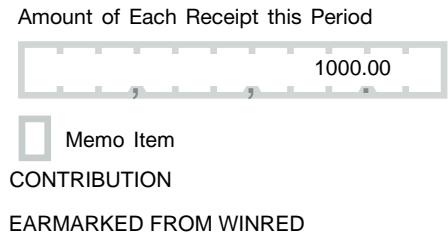
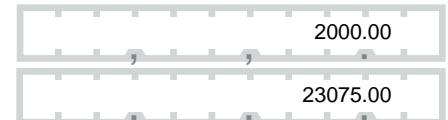
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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>JARVIS, ALEXI</b> , , , <b>A.</b> Mailing Address 1306 CLAYBORNE HOUSE COURT		Date of Receipt M M / D D / Y Y Y Y 12 27 2025 <b>Transaction ID : SA11A.74453</b>
City MCLEAN      State VA      Zip Code 22101-2402  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00  
Name of Employer FIERCE GOVERNMENT RELATIONS      Occupation LEGISLATIVE DIRECTOR  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00
Full Name (Last, First, Middle Initial) <b>WINRED</b> <b>B.</b> Mailing Address PO BOX 9891		Date of Receipt M M / D D / Y Y Y Y 12 29 2025 <b>Transaction ID : SA11C.74464</b>
City ARLINGTON      State VA      Zip Code 22219-1891  FEC ID number of contributing federal political committee. <b>C C00694323</b>		Amount of Each Receipt this Period 1001.10  
Name of Employer      Occupation  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 187883.10
Full Name (Last, First, Middle Initial) <b>LASS, CON</b> , , , <b>C.</b> Mailing Address 1301 CHANCEL PLACE		Date of Receipt M M / D D / Y Y Y Y 12 29 2025 <b>Transaction ID : SA11A.74469</b>
City ALEXANDRIA      State VA      Zip Code 22314-4707  FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00  
Name of Employer OGILVY GOVERNMENT RELATIONS      Occupation GOVERNMENT RELATIONS  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		2000.00  
<b>TOTAL</b> This Period (last page this line number only) .....		23075.00

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

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for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)  
**Boozman for Arkansas**

Full Name (Last, First, Middle Initial)

## Boozman for Arkansas

Full Name (Last, First, Middle Initial)

## AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATE

B. Mailing Address 102752 WEST HIGGINS RD SUITE 500			<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>12</td><td></td><td></td><td>09</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	12			09			2025			
M	M	/	D	D	/	Y	Y	Y	Y														
12			09			2025																	
City ROSEMONT	State IL	Zip Code 60018-																					
FEC ID number of contributing federal political committee.		<b>C</b> C00173153																					
Name of Employer	Occupation																						
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"><tr><td>2500.00</td></tr></table>			2500.00																			
2500.00																							
Amount of Each Receipt this Period <table border="1"><tr><td>2500.00</td></tr></table>				2500.00																			
2500.00																							
<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>																							

Full Name (Last, First, Middle Initial)

AMERICAN GAMING ASSOCIATION POLITICAL ACTION COMMITTEE

C. Mailing Address 1930 SUMMIT TERRACE SUITE 700			<table border="1"><tr><td>M</td><td>M</td></tr><tr><td>12</td><td></td></tr></table> / <table border="1"><tr><td>D</td><td>D</td></tr><tr><td>05</td><td></td></tr></table> / <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2025</td><td></td><td></td><td></td></tr></table>	M	M	12		D	D	05		Y	Y	Y	Y	2025			
M	M																		
12																			
D	D																		
05																			
Y	Y	Y	Y																
2025																			
City ALEXANDRIA	State VA	Zip Code 22307-1145																	
FEC ID number of contributing federal political committee. <b>C</b> C00309146																			
Name of Employer	Occupation																		
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <table border="1"><tr><td>2500.00</td></tr></table>			2500.00															
2500.00																			
<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>																			

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

6000.00

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

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

 Use separate schedule(s)  
 for each category of the  
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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>AMERICAN PORTABLE DIAGNOSTIC ASSOCIATION APDA-PAC</b> <b>A.</b> Mailing Address 1065 EXECUTIVE PKWY STE 220 City ST LOUIS State MO Zip Code 63141- FEC ID number of contributing federal political committee. <b>C</b> C00347658 Name of Employer Occupation Receipt For: 2028 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 10 30 2025 <b>Transaction ID : SA11C.74255</b> Amount of Each Receipt this Period 1000.00 □ Memo Item <b>CONTRIBUTION</b>
Full Name (Last, First, Middle Initial) <b>AMGEN INC. PAC</b> <b>B.</b> Mailing Address 601 13TH STREET NORTHWEST SUITE 1100 NORTH City WASHINGTON State DC Zip Code 20005-3822 FEC ID number of contributing federal political committee. <b>C</b> C00251876 Name of Employer Occupation Receipt For: 2028 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ 3500.00		Date of Receipt M M / D D / Y Y Y Y 12 23 2025 <b>Transaction ID : SA11C.74443</b> Amount of Each Receipt this Period 3500.00 □ Memo Item <b>CONTRIBUTION</b>
Full Name (Last, First, Middle Initial) <b>CALIFORNIA NATIONS INDIAN GAMING ASSOCIATION FEDERAL PAC (CN)</b> <b>C.</b> Mailing Address 515 S. FIGUEROA ST., STE. 1110 City LOS ANGELES State CA Zip Code 90071-3314 FEC ID number of contributing federal political committee. <b>C</b> C00505974 Name of Employer Occupation Receipt For: 2028 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 12 29 2025 <b>Transaction ID : SA11C.74460</b> Amount of Each Receipt this Period 1000.00 □ Memo Item <b>CONTRIBUTION</b>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		5500.00 □ Memo Item
<b>TOTAL</b> This Period (last page this line number only) .....		►

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

 Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>COINBASE, INC. INNOVATION PAC (COINBASE INNOVATION PAC)</b> <b>A.</b> Mailing Address 248 3RD STREET, #434		Date of Receipt M M / D D / Y Y Y Y 12 09 2025 <b>Transaction ID : SA11C.74428</b>
City <b>OAKLAND</b>  FEC ID number of contributing federal political committee. <b>C C00804179</b>		Amount of Each Receipt this Period 1000.00
Name of Employer  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation  Election Cycle-to-Date ▼ 1000.00
Full Name (Last, First, Middle Initial) <b>CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION COMMITTEE</b> <b>B.</b> Mailing Address 1400 16TH STREET NW  SUITE 600  City <b>WASHINGTON</b>  FEC ID number of contributing federal political committee. <b>C C00262295</b>		Date of Receipt M M / D D / Y Y Y Y 12 26 2025 <b>Transaction ID : SA11C.74450</b>
Name of Employer  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation  Election Cycle-to-Date ▼ 6000.00
Full Name (Last, First, Middle Initial) <b>CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION COMMITTEE</b> <b>C.</b> Mailing Address 1400 16TH STREET NW  SUITE 600  City <b>WASHINGTON</b>  FEC ID number of contributing federal political committee. <b>C C00262295</b>		Date of Receipt M M / D D / Y Y Y Y 12 26 2025 <b>Transaction ID : SA11C.74451</b>
Name of Employer  Receipt For: 2028 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		Occupation  Election Cycle-to-Date ▼ 6000.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		Amount of Each Receipt this Period 1000.00
<b>TOTAL</b> This Period (last page this line number only) .....		Amount of Each Receipt this Period 4000.00

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

 Use separate schedule(s)  
 for each category of the  
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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>GENWORTH FINANCIAL INC AND ENACT POLITICAL ACTION COMMITTEE</b> <b>A.</b> Mailing Address 6620 W. BROAD STREET		Date of Receipt M M / D D / Y Y Y Y 12 18 2025 <b>Transaction ID : SA11C.74429</b>
City RICHMOND State VA Zip Code 23230-1716		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b> C00404194		Memo Item <b>CONTRIBUTION</b>
Name of Employer Occupation		
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00
Full Name (Last, First, Middle Initial) <b>HB STRATEGIES PAC</b> <b>B.</b> Mailing Address 217 E CAPITOL AVE.		Date of Receipt M M / D D / Y Y Y Y 12 31 2025 <b>Transaction ID : SA11C.74490</b>
City JEFFERSON CITY State MO Zip Code 65101-3001		Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. <b>C</b> C00904508		Memo Item <b>CONTRIBUTION</b>
Name of Employer Occupation		
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00
Full Name (Last, First, Middle Initial) <b>IHEARTMEDIA INC. PAC</b> <b>C.</b> Mailing Address 20880 STONE OAK PARKWAY		Date of Receipt M M / D D / Y Y Y Y 12 30 2025 <b>Transaction ID : SA11C.74472</b>
City SAN ANTONIO State TX Zip Code 78258-7460		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b> C00279216		Memo Item <b>CONTRIBUTION</b>
Name of Employer Occupation		
Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Election Cycle-to-Date ▼ 5000.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		5500.00
<b>TOTAL</b> This Period (last page this line number only) .....		5500.00

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(check only one)

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NAME OF COMMITTEE (In Full)  
**Boozman for Arkansas**

<p><b>A.</b> Full Name (Last, First, Middle Initial)  <b>LIVESTOCK MARKETING ASSOCIATION PAC (LMA-PAC)</b></p> <p>Mailing Address 11501 OUTLOOK STREET  #250</p> <p>City  OVERLAND PARK</p> <p>State  KS</p> <p>Zip Code  66211-1807</p> <p>FEC ID number of contributing  federal political committee.</p> <p><b>C</b> C00244400</p> <p>Name of Employer</p> <p>Occupation</p> <p>Receipt For: 2028</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>1000.00</p>				<p>Date of Receipt</p> <table border="1"> <tr> <td>M</td> <td>M</td> <td>/</td> <td>D</td> <td>D</td> <td>/</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td>12</td> <td></td> <td></td> <td>30</td> <td></td> <td></td> <td>2025</td> <td></td> <td></td> <td></td> </tr> </table> <p><b>Transaction ID : SA11C.74471</b></p> <p>Amount of Each Receipt this Period</p> <table border="1"> <tr> <td>1000.00</td> </tr> </table> <p><input type="checkbox"/> Memo Item  <b>CONTRIBUTION</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	12			30			2025				1000.00
M	M	/	D	D	/	Y	Y	Y	Y																
12			30			2025																			
1000.00																									
<p><b>B.</b> Full Name (Last, First, Middle Initial)  <b>LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMM</b></p> <p>Mailing Address 2121 CRYSTAL DRIVE  SUITE 100</p> <p>City  ARLINGTON</p> <p>State  VA</p> <p>Zip Code  22202-3706</p> <p>FEC ID number of contributing  federal political committee.</p> <p><b>C</b> C00303024</p> <p>Name of Employer</p> <p>Occupation</p> <p>Receipt For: 2028</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>4500.00</p>				<p>Date of Receipt</p> <table border="1"> <tr> <td>M</td> <td>M</td> <td>/</td> <td>D</td> <td>D</td> <td>/</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td>12</td> <td></td> <td></td> <td>29</td> <td></td> <td></td> <td>2025</td> <td></td> <td></td> <td></td> </tr> </table> <p><b>Transaction ID : SA11C.74461</b></p> <p>Amount of Each Receipt this Period</p> <table border="1"> <tr> <td>1000.00</td> </tr> </table> <p><input type="checkbox"/> Memo Item  <b>CONTRIBUTION</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	12			29			2025				1000.00
M	M	/	D	D	/	Y	Y	Y	Y																
12			29			2025																			
1000.00																									
<p><b>C.</b> Full Name (Last, First, Middle Initial)  <b>LYONDELL CHEMICAL COMPANY PAC</b></p> <p>Mailing Address 1221 MCKINNEY STREET  SUITE 300</p> <p>City  HOUSTON</p> <p>State  TX</p> <p>Zip Code  77010-2036</p> <p>FEC ID number of contributing  federal political committee.</p> <p><b>C</b> C00306175</p> <p>Name of Employer</p> <p>Occupation</p> <p>Receipt For: 2028</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p> <p>5000.00</p>				<p>Date of Receipt</p> <table border="1"> <tr> <td>M</td> <td>M</td> <td>/</td> <td>D</td> <td>D</td> <td>/</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td>12</td> <td></td> <td></td> <td>09</td> <td></td> <td></td> <td>2025</td> <td></td> <td></td> <td></td> </tr> </table> <p><b>Transaction ID : SA11C.74392</b></p> <p>Amount of Each Receipt this Period</p> <table border="1"> <tr> <td>2500.00</td> </tr> </table> <p><input type="checkbox"/> Memo Item  <b>CONTRIBUTION</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	12			09			2025				2500.00
M	M	/	D	D	/	Y	Y	Y	Y																
12			09			2025																			
2500.00																									

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

4500.00

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

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**SCHEDULE A (FEC Form 3)**  
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 Use separate schedule(s)  
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 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

<p><b>A.</b> Full Name (Last, First, Middle Initial)  <b>NATIONAL MARINE MANUFACTURERS ASSOCIATION PAC</b>  <b>Mailing Address</b> 601 PENNSYLVANIA AVE NW #320</p> <p>City WASHINGTON State DC Zip Code 20004-2732</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00245548</p> <p>Name of Employer      Occupation</p> <p>Receipt For: 2028      Election Cycle-to-Date ▼  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼      8500.00</p>		<p>Date of Receipt  <input type="checkbox"/> M <input type="checkbox"/> M / <input type="checkbox"/> D <input type="checkbox"/> D / <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y  12                    02                    2025</p> <p><b>Transaction ID : SA11C.74371</b></p> <p>Amount of Each Receipt this Period  <input type="checkbox"/> 2500.00</p> <p><input type="checkbox"/> Memo Item  <b>CONTRIBUTION</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial)  <b>S. C. JOHNSON &amp; SON, INC POLITICAL ACTION COMMITTEE</b>  <b>Mailing Address</b> 1525 HOWE STREET</p> <p>City RACINE State WI Zip Code 53403-2237</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00342246</p> <p>Name of Employer      Occupation</p> <p>Receipt For: 2028      Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼      3000.00</p>		<p>Date of Receipt  <input type="checkbox"/> M <input type="checkbox"/> M / <input type="checkbox"/> D <input type="checkbox"/> D / <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y  12                    31                    2025</p> <p><b>Transaction ID : SA11C.74491</b></p> <p>Amount of Each Receipt this Period  <input type="checkbox"/> 3000.00</p> <p><input type="checkbox"/> Memo Item  <b>CONTRIBUTION</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial)  <b>SEABOARD CORPORATION POLITICAL ACTION COMMITTEE</b>  <b>Mailing Address</b> 9000 W 67TH STREET</p> <p>City MERRIAM State KS Zip Code 66202-3638</p> <p>FEC ID number of contributing federal political committee. <b>C</b> C00246736</p> <p>Name of Employer      Occupation</p> <p>Receipt For: 2028      Election Cycle-to-Date ▼  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼      5000.00</p>		<p>Date of Receipt  <input type="checkbox"/> M <input type="checkbox"/> M / <input type="checkbox"/> D <input type="checkbox"/> D / <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y <input type="checkbox"/> Y  12                    17                    2025</p> <p><b>Transaction ID : SA11C.74421</b></p> <p>Amount of Each Receipt this Period  <input type="checkbox"/> 5000.00</p> <p><input type="checkbox"/> Memo Item  <b>CONTRIBUTION</b></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ►</p> <p><b>TOTAL</b> This Period (last page this line number only) ..... ►</p>		<input type="checkbox"/> 10500.00

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

 Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>TEXAS INTERNATIONAL PRODUCE ASSN TEX PAC</b> <b>A.</b> Mailing Address 901 BUSINESS PARK DRIVE SUITE 500		Date of Receipt M M / D D / Y Y Y Y 10 30 / 2025 <b>Transaction ID : SA11C.74254</b>
City MISSION State TX Zip Code 78572-  FEC ID number of contributing federal political committee. <b>C</b> C00429217		Amount of Each Receipt this Period 1000.00  <input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation  Election Cycle-to-Date ▼ 1000.00
Full Name (Last, First, Middle Initial) <b>THE CAPITAL GROUP COMPANIES INC PAC</b> <b>B.</b> Mailing Address 333 SOUTH HOPE STREET		Date of Receipt M M / D D / Y Y Y Y 10 28 / 2025 <b>Transaction ID : SA11C.74317</b>
City LOS ANGELES State CA Zip Code 90071-  FEC ID number of contributing federal political committee. <b>C</b> C00540518		Amount of Each Receipt this Period 5000.00  <input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer  Receipt For: 2028 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		Occupation  Election Cycle-to-Date ▼ 10000.00
Full Name (Last, First, Middle Initial) <b>TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC</b> <b>C.</b> Mailing Address 325 7TH STREET NW STE 1000		Date of Receipt M M / D D / Y Y Y Y 12 19 / 2025 <b>Transaction ID : SA11C.74435</b>
City WASHINGTON State DC Zip Code 20004-2801  FEC ID number of contributing federal political committee. <b>C</b> C00542365		Amount of Each Receipt this Period 1000.00  <input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer  Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation  Election Cycle-to-Date ▼ 1000.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		7000.00
<b>TOTAL</b> This Period (last page this line number only) .....		7000.00

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 Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>U. S. BANCORP FEDERAL PAC</b> <b>A.</b> Mailing Address 950 F STREET NW SUITE 750 City WASHINGTON State DC Zip Code 20004-1487		Date of Receipt M M / D D / Y Y Y Y 11 25 2025 <b>Transaction ID : SA11C.74346</b>
FEC ID number of contributing federal political committee. <b>C</b> C00488882		Amount of Each Receipt this Period 
Name of Employer Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) <b>UNITED AIRLINES, INC. POLITICAL ACTION COMMITTEE (UAPAC)</b> <b>B.</b> Mailing Address 233 S. WACKER HDQGV City CHICAGO State IL Zip Code 60606-7147		Date of Receipt M M / D D / Y Y Y Y 12 17 2025 <b>Transaction ID : SA11C.74419</b>
FEC ID number of contributing federal political committee. <b>C</b> C00101766		Amount of Each Receipt this Period 
Name of Employer Receipt For: 2028 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) <b>C.</b> Mailing Address		Date of Receipt M M / D D / Y Y Y Y
City State Zip Code		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		Occupation Election Cycle-to-Date ▼ 
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		
<b>TOTAL</b> This Period (last page this line number only) .....		

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

 Use separate schedule(s)  
 for each category of the  
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
<input checked="" type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>ARVEST BANK</b> <b>A.</b> Mailing Address PO BOX 809		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>11</td><td></td><td></td><td>07</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : SA15.10547	M	M	/	D	D	/	Y	Y	Y	Y	11			07			2025				
M	M	/	D	D	/	Y	Y	Y	Y														
11			07			2025																	
City <b>ROGERS</b>		State <b>AR</b>	Zip Code <b>72757-0809</b>																				
FEC ID number of contributing federal political committee. <b>C</b>																							
Name of Employer		Occupation																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <b>65387.37</b>																					
Full Name (Last, First, Middle Initial) <b>ARVEST BANK</b> <b>B.</b> Mailing Address PO BOX 809		Amount of Each Receipt this Period <b>5115.20</b>																					
City <b>ROGERS</b>		State <b>AR</b>	Zip Code <b>72757-0809</b>																				
FEC ID number of contributing federal political committee. <b>C</b>																							
Name of Employer		Occupation																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <b>65387.37</b>																					
Full Name (Last, First, Middle Initial) <b>WELLS FARGO</b> <b>C.</b> Mailing Address 330 NORTH WASHINGTON STREET		Date of Receipt <table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>11</td><td></td><td></td><td>07</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> Transaction ID : SA15.10548		M	M	/	D	D	/	Y	Y	Y	Y	11			07			2025			
M	M	/	D	D	/	Y	Y	Y	Y														
11			07			2025																	
City <b>ALEXANDRIA</b>		State <b>VA</b>	Zip Code <b>22314</b>																				
FEC ID number of contributing federal political committee. <b>C</b>																							
Name of Employer		Occupation																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <b>692.31</b>																					
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		Amount of Each Receipt this Period <b>2.06</b>																					
<b>TOTAL</b> This Period (last page this line number only) .....		<table border="1" style="display: inline-table; vertical-align: middle;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>10</td><td></td><td></td><td>31</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table> <b>7696.87</b>		M	M	/	D	D	/	Y	Y	Y	Y	10			31			2025			
M	M	/	D	D	/	Y	Y	Y	Y														
10			31			2025																	

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

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

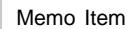
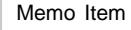
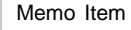
FOR LINE NUMBER: PAGE 25 OF 50

 (check only one)  
 11a 11b 11c 11d  
 12 13a 13b 14 X 15

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial) <b>WELLS FARGO</b> <b>A.</b> Mailing Address 330 NORTH WASHINGTON STREET		Date of Receipt M M / D D / Y Y Y Y Y 11 28 2025
City ALEXANDRIA      State VA      Zip Code 22314		<b>Transaction ID : SA15.10542</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 
Name of Employer      Occupation		 Memo Item <b>INTEREST EARNED</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) <b>WELLS FARGO</b> <b>B.</b> Mailing Address 330 NORTH WASHINGTON STREET		Date of Receipt M M / D D / Y Y Y Y Y 12 31 2025
City ALEXANDRIA      State VA      Zip Code 22314		<b>Transaction ID : SA15.10604</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 
Name of Employer      Occupation		 Memo Item <b>INTEREST EARNED</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 
Full Name (Last, First, Middle Initial) <b>C.</b> Mailing Address		Date of Receipt M M / D D / Y Y Y Y Y
City      State      Zip Code		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 
Name of Employer      Occupation		 Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ►		
<b>TOTAL</b> This Period (last page this line number only) .....		

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**

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

 FOR LINE NUMBER:  
 (check only one)

 PAGE 26 OF 50  
 X 17 18 19a 19b  
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)	
Boozman for Arkansas	

Full Name (Last, First, Middle Initial)

**A. HENDERSON , HANNAH , M., ,**

Mailing Address 520 W. POPLAR ST

City  
ROGERSState  
ARZip Code  
72756Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President
 

Disbursement For:

 Primary  
 General  
 Other (specify) ▼
 

State: District:

Full Name (Last, First, Middle Initial)

**B. HENDERSON , HANNAH , M., ,**

Mailing Address 520 W. POPLAR ST

City  
ROGERSState  
ARZip Code  
72756Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President
 

Disbursement For:

 Primary  
 General  
 Other (specify) ▼
 

State: District:

Full Name (Last, First, Middle Initial)

**C. HENDERSON , HANNAH , M., ,**

Mailing Address 520 W. POPLAR ST

City  
ROGERSState  
ARZip Code  
72756Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought:

 House  
 Senate  
 President
 

Disbursement For:

 Primary  
 General  
 Other (specify) ▼
 

State: District:

Date of Disbursement

 M M 11 / D D 28 / Y Y Y Y Y  
 11 28 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

919.17

Transaction ID : SB17.I10539

 Memo Item

Date of Disbursement

 M M 12 / D D 29 / Y Y Y Y Y  
 12 29 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

919.17

Transaction ID : SB17.I10577

 Memo Item

Date of Disbursement

 M M 10 / D D 31 / Y Y Y Y Y  
 10 31 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

919.17

Transaction ID : SB17.I9502

 Memo Item

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

2757.51

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

 9 9 9 9 9  
 9 9 9 9 9

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**

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

 FOR LINE NUMBER:  
 (check only one)

 PAGE 27 OF 50  
 17  18  19a  19b  
 20a  20b  20c  21

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<b>NAME OF COMMITTEE (In Full)</b> <b>Boozman for Arkansas</b>	
---	--

Full Name (Last, First, Middle Initial) <b>A. OLSON, SUSAN, L., ,</b>		Date of Disbursement <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>12</td><td></td><td></td><td>08</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	12			08			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
12			08			2025																
Mailing Address 9809 BRIDGETON DR		FEC Identification Number <b>C</b>																				
City TAMPA		Zip Code 33626																				
Purpose of Disbursement <b>ACCOUNTING CONSULTING</b>		Category/ Type																				
Candidate Name		Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Category/ Type																				
State: District:																						
Full Name (Last, First, Middle Initial) <b>B. ADP, INC.</b>		Amount of Each Disbursement this Period 3000.00																				
Mailing Address ONE ADP BOULEVARD		Transaction ID : SB17.I10572																				
City ROSELAND		Memo Item																				
Purpose of Disbursement <b>PAYROLL SERVICE FEE</b>		Date of Disbursement <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>10</td><td></td><td></td><td>10</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			10			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
10			10			2025																
Candidate Name		FEC Identification Number <b>C</b>																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Amount of Each Disbursement this Period 77.33																				
State: District:	Transaction ID : SB17.I10504																					
Full Name (Last, First, Middle Initial) <b>C. ADP, INC.</b>		Memo Item																				
Mailing Address ONE ADP BOULEVARD		Date of Disbursement <table border="1"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>11</td><td></td><td></td><td>07</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	11			07			2025			
M	M	/	D	D	/	Y	Y	Y	Y													
11			07			2025																
City ROSELAND		FEC Identification Number <b>C</b>																				
Purpose of Disbursement <b>PAYROLL SERVICE FEE</b>		Amount of Each Disbursement this Period 77.33																				
Candidate Name		Transaction ID : SB17.I10534																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Memo Item																				
State: District:																						
<b>SUBTOTAL</b> of Disbursements This Page (optional).....►		3154.66																				
<b>TOTAL</b> This Period (last page this line number only).....►		3154.66																				

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**

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

 FOR LINE NUMBER:  
 (check only one)

 PAGE 28 OF 50  
 X 17 18 19a 19b  
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial)

**A. ADP, INC.**

Mailing Address ONE ADP BOULEVARD

 City  
 ROSELAND

 State  
 NJ

 Zip Code  
 07068

 Purpose of Disbursement  
 PAYROLL SERVICE FEE

Candidate Name

 Category/  
 Type

 Office Sought:  
 House  
 Senate  
 President

 Disbursement For:  
 Primary  
 General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M 12 / D D 05 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

77.33

Transaction ID : SB17.I10543

Memo Item

**B. ADP, INC.**

Mailing Address ONE ADP BOULEVARD

 City  
 ROSELAND

 State  
 NJ

 Zip Code  
 07068

 Purpose of Disbursement  
 TAXES & WITHHOLDINGS

Candidate Name

 Category/  
 Type

 Office Sought:  
 House  
 Senate  
 President

 Disbursement For:  
 Primary  
 General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M 11 / D D 26 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

157.33

Transaction ID : SB17.I10544

Memo Item

**C. ADP, INC.**

Mailing Address ONE ADP BOULEVARD

 City  
 ROSELAND

 State  
 NJ

 Zip Code  
 07068

 Purpose of Disbursement  
 TAXES & WITHHOLDINGS

Candidate Name

 Category/  
 Type

 Office Sought:  
 House  
 Senate  
 President

 Disbursement For:  
 Primary  
 General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M 12 / D D 29 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

157.33

Transaction ID : SB17.I10576

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

391.99

**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 Page

 FOR LINE NUMBER:  
 (check only one)

 PAGE 29 OF 50  
 X 17 18 19a 19b  
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial)

**A. ADP, INC.**

Mailing Address ONE ADP BOULEVARD

 City  
 ROSELAND

State

NJ

 Zip Code  
 07068

 Purpose of Disbursement  
 TAXES & WITHHOLDINGS

Candidate Name

 Category/  
 Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  
 General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. BENTON COUNTY REPUBLICAN COMMITTEE**

Mailing Address PO BOX 1678

 City  
 BENTONVILLE

State

AR

 Zip Code  
 72712

 Purpose of Disbursement  
 EVENT SPONSORSHIP

Candidate Name

 Category/  
 Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  
 General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. CMDI**

 Mailing Address 1593 SPRING HILL ROAD  
 SUITE 400

 City  
 TYSONS CORNER

State

VA

 Zip Code  
 22182

 Purpose of Disbursement  
 SOFTWARE

Candidate Name

 Category/  
 Type

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  
 General  
 Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

3857.33

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

Date of Disbursement

M M 10 / D D 31 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

157.33

Transaction ID : SB17.I9503

Memo Item

Date of Disbursement

M M 10 / D D 31 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB17.I10501

Memo Item

Date of Disbursement

M M 10 / D D 02 / Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I10535

Memo Item

# SCHEDULE B (FEC Form 3)

## ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
SOFTWARE

Candidate Name

Date of Disbursement

M M 11 /  D D 04 /  Y Y Y Y Y 2025

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

FEC Identification Number

C

State: District:

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I10536

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
SOFTWARE

Candidate Name

Date of Disbursement

M M 12 /  D D 02 /  Y Y Y Y Y 2025

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

FEC Identification Number

C

State: District:

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I10545

Memo Item

Full Name (Last, First, Middle Initial)

**C. KOCH & HOOS, LLC**

Mailing Address 901 N WASHINGTON ST, SUITE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
ACCOUNTING/COMPLIANCE SERVICES

Candidate Name

Date of Disbursement

M M 11 /  D D 19 /  Y Y Y Y Y 2025

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

FEC Identification Number

C

State: District:

Amount of Each Disbursement this Period

2052.50

Transaction ID : SB17.I10538

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

4052.50

**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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 32 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. RESTAURANT ASSOCIATES

Mailing Address PO BOX 417632

City BOSTON	State MA	Zip Code 02241-1337
----------------	-------------	------------------------

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Date of Disbursement

M M 11	/	D D 24	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C
---

Amount of Each Disbursement this Period

2409.00
---------

Transaction ID : SB17.I10541

Memo Item

### B. RESTAURANT ASSOCIATES

Mailing Address PO BOX 417632

City BOSTON	State MA	Zip Code 02241-1337
----------------	-------------	------------------------

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Date of Disbursement

M M 10	/	D D 03	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C
---

Amount of Each Disbursement this Period

226.30
--------

Transaction ID : SB17.I9490

Memo Item

### C. T-MOBILE

Mailing Address 2004 S PROMENADE BLVD  
SUITE B1

City ROGERS	State AR	Zip Code 72758
----------------	-------------	-------------------

Purpose of Disbursement  
INTERNET EXPENSE

Candidate Name

Date of Disbursement

M M 10	/	D D 27	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

FEC Identification Number

C
---

Amount of Each Disbursement this Period

60.00
-------

Transaction ID : SB17.I10503

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

2695.30
---------

**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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 33 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. T-MOBILE

Mailing Address 2004 S PROMENADE BLVD  
SUITE B1

City  
ROGERS

State  
AR

Zip Code  
72758

Purpose of Disbursement  
INTERNET EXPENSE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M M 11 /  D D 28 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.I10546

Memo Item

Full Name (Last, First, Middle Initial)

### B. T-MOBILE

Mailing Address 2004 S PROMENADE BLVD  
SUITE B1

City  
ROGERS

State  
AR

Zip Code  
72758

Purpose of Disbursement  
INTERNET EXPENSE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M M 12 /  D D 29 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.I10614

Memo Item

Full Name (Last, First, Middle Initial)

### C. THE RIZZO DUKES GROUP

Mailing Address 8079 CANNONBALL RIDGE LANE

City  
WARRENTON

State  
VA

Zip Code  
20186

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M M 11 /  D D 07 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

11190.00

Transaction ID : SB17.I10514

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

11310.00

**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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 34 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. TUTTLE & TUTTLE

Mailing Address 12 FORT WILLIAMS PARKWAY

City ALEXANDRIA	State VA	Zip Code 22304-1804
--------------------	-------------	------------------------

Purpose of Disbursement  
PRINTING

Candidate Name

Date of Disbursement

M M 12 /  D D 10 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

FEC Identification Number

C

Full Name (Last, First, Middle Initial)

### B. VISA - ARVEST BANK

Mailing Address PO BOX 569200

City DALLAS	State TX	Zip Code 75356-9200
----------------	-------------	------------------------

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMOS

Candidate Name

Date of Disbursement

M M 11 /  D D 03 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

FEC Identification Number

C

Full Name (Last, First, Middle Initial)

### C. ALL THINGS ARKANSAS

Mailing Address 610 CENTRAL AVE

City HOT SPRINGS	State AR	Zip Code 71901
---------------------	-------------	-------------------

Purpose of Disbursement  
HONEY

Candidate Name

Date of Disbursement

M M 10 /  D D 20 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

FEC Identification Number

C

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

6012.15

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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. ALL THINGS ARKANSAS

Mailing Address 610 CENTRAL AVE

City HOT SPRINGS	State AR	Zip Code 71901
---------------------	-------------	-------------------

Purpose of Disbursement  
HONEY

Candidate Name

Date of Disbursement

M M 10	/	D D 20	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C
---

Amount of Each Disbursement this Period

12.38
-------

Transaction ID : SB17.I10513

Memo Item

### B. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DALLAS	State TX	Zip Code 75261-9616
----------------	-------------	------------------------

Purpose of Disbursement  
AIRFARE

Candidate Name

Date of Disbursement

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

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C
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Amount of Each Disbursement this Period

549.96
--------

Transaction ID : SB17.I10520

Memo Item

### C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DALLAS	State TX	Zip Code 75261-9616
----------------	-------------	------------------------

Purpose of Disbursement  
AIRFARE

Candidate Name

Date of Disbursement

M M 10	/	D D 20	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

FEC Identification Number

C
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Amount of Each Disbursement this Period

539.98
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Transaction ID : SB17.I10533

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00
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**TOTAL** This Period (last page this line number only)..... ►

0.00
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# SCHEDULE B (FEC Form 3)

## ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

PAGE 36 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. AROMATIQUE

Mailing Address PO BOX 6000 3421 HIGHWAY 25B NORTH			Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>10</td><td></td><td></td><td>20</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	10			20			2025			
M	M	/	D	D	/	Y	Y	Y	Y															
10			20			2025																		
City HEBER SPRINGS		State AR	Zip Code 72543																					
Purpose of Disbursement CANDLES																								
Candidate Name			Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																							
State: District:																								

Full Name (Last, First, Middle Initial)			Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>10</td><td></td><td></td><td>14</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	10			14			2025			
M	M	/	D	D	/	Y	Y	Y	Y															
10			14			2025																		
Mailing Address 4404 W WALNUT STREET SUITE 2																								
City ROGERS		State AR	Zip Code 72756																					
Purpose of Disbursement PHONE EXPENSE																								
Candidate Name			Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																							
State: District:																								

Full Name (Last, First, Middle Initial)			Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>10</td><td></td><td></td><td>16</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	10			16			2025			
M	M	/	D	D	/	Y	Y	Y	Y															
10			16			2025																		
Mailing Address 8 VIXEN TRAIL																								
City JACKSONVILLE		State AR	Zip Code 72076																					
Purpose of Disbursement EQUIPMENT FEE																								
Candidate Name			Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																							
State: District:																								

SUBTOTAL of Disbursements This Page (optional).....			► <table border="1"><tr><td>0.00</td></tr></table>		0.00
0.00					
TOTAL This Period (last page this line number only).....			► <table border="1"><tr><td></td></tr></table>		

# SCHEDULE B (FEC Form 3)

## ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

PAGE 37 OF 50

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. CUBESMART

Mailing Address 1815 GREEN MOUNTAIN DR

City  
LITTLE ROCK

State  
AR

Zip Code  
72212

Purpose of Disbursement  
STORAGE



Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M 10 /  D D 01 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

118.32

Transaction ID : SB17.I10526

Memo Item

### B. DROPBOX

Mailing Address 185 BERRY ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94107

Purpose of Disbursement  
SUBSCRIPTION



Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M 10 /  D D 15 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

11.99

Transaction ID : SB17.I10532

Memo Item

### C. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043

Purpose of Disbursement  
IT SERVICES



Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M M 10 /  D D 01 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

151.20

Transaction ID : SB17.I10527

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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 38 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. LA PLAZA STRIP & STORAGE

Mailing Address 320 N BLOOMINGTON ST  
STE. H

City LOWELL	State AR	Zip Code 72745-9136
----------------	-------------	------------------------

Purpose of Disbursement  
STORAGE

Candidate Name

Date of Disbursement

M M 10	/	D D 01	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C
---

Amount of Each Disbursement this Period

70.19
-------

Transaction ID : SB17.I10528

Memo Item

### B. MANGIALARDOS

Mailing Address 1317 PENNSYLVANIA AVE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Date of Disbursement

M M 10	/	D D 03	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C
---

Amount of Each Disbursement this Period

181.10
--------

Transaction ID : SB17.I10517

Memo Item

### C. MANGIALARDOS

Mailing Address 1317 PENNSYLVANIA AVE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Date of Disbursement

M M 10	/	D D 03	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

FEC Identification Number

C
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Amount of Each Disbursement this Period

202.11
--------

Transaction ID : SB17.I10518

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00
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**TOTAL** This Period (last page this line number only)..... ►

0.00
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# SCHEDULE B (FEC Form 3)

## ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

PAGE 39 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. RX CATERING

Mailing Address 921 W CAPITOL AVE

City LITTLE ROCK	State AR	Zip Code 72201
---------------------	-------------	-------------------

Purpose of Disbursement  
CATERING

Candidate Name

Date of Disbursement

M M 10 /  D D 16 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1185.57

Transaction ID : SB17.I10531

Memo Item

Full Name (Last, First, Middle Initial)

### B. SENATE DINING ROOM

Mailing Address US CAPITOL  
S-110

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Date of Disbursement

M M 09 /  D D 30 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

376.37

Transaction ID : SB17.I10516

Memo Item

Full Name (Last, First, Middle Initial)

### C. VISA - ARVEST BANK

Mailing Address PO BOX 569200

City DALLAS	State TX	Zip Code 75356-9200
----------------	-------------	------------------------

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMOS

Candidate Name

Date of Disbursement

M M 12 /  D D 02 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

6517.59

Transaction ID : SB17.I10555

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

6517.59

**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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 40 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. AMAZON MARKETPLACE

Mailing Address 1200 12TH AVENUE S

City SEATTLE	State WA	Zip Code 98144-2712
-----------------	-------------	------------------------

Purpose of Disbursement  
GIFT BAGS

Candidate Name

Date of Disbursement

M M 11	/	D D 08	/	Y Y Y Y Y 2025
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Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C
---

Amount of Each Disbursement this Period

420.71
--------

Transaction ID : SB17.I10554

Memo Item

### B. AMAZON MARKETPLACE

Mailing Address 1200 12TH AVENUE S

City SEATTLE	State WA	Zip Code 98144-2712
-----------------	-------------	------------------------

Purpose of Disbursement  
STOCK PAPER/RIBBONS

Candidate Name

Date of Disbursement

M M 11	/	D D 15	/	Y Y Y Y Y 2025
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Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C
---

Amount of Each Disbursement this Period

30.72
-------

Transaction ID : SB17.I10556

Memo Item

### C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DALLAS	State TX	Zip Code 75261-9616
----------------	-------------	------------------------

Purpose of Disbursement  
AIRFARE

Candidate Name

Date of Disbursement

M M 11	/	D D 11	/	Y Y Y Y Y 2025
-----------	---	-----------	---	-------------------

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

FEC Identification Number

C
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Amount of Each Disbursement this Period

599.97
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Transaction ID : SB17.I10559

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00
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**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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 41 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DALLAS	State TX	Zip Code 75261-9616
----------------	-------------	------------------------

Purpose of Disbursement  
VENDOR REFUND

Candidate Name

Date of Disbursement

M M 11 /  D D 13 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

– 27.00

Transaction ID : SB17.I10560

Memo Item

### B. AT&T

Mailing Address 4404 W WALNUT STREET  
SUITE 2

City ROGERS	State AR	Zip Code 72756
----------------	-------------	-------------------

Purpose of Disbursement  
PHONE EXPENSE

Candidate Name

Date of Disbursement

M M 11 /  D D 14 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

372.19

Transaction ID : SB17.I10571

Memo Item

### C. CUBESMART

Mailing Address 1815 GREEN MOUNTAIN DR

City LITTLE ROCK	State AR	Zip Code 72212
---------------------	-------------	-------------------

Purpose of Disbursement  
STORAGE

Candidate Name

Date of Disbursement

M M 11 /  D D 01 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
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State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

120.00

Transaction ID : SB17.I10562

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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 42 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. DROPBOX

Mailing Address 185 BERRY ST			Date of Disbursement  <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>11</td><td></td><td></td><td>15</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	11			15			2025			
M	M	/	D	D	/	Y	Y	Y	Y														
11			15			2025																	
City SAN FRANCISCO		State CA	Zip Code 94107																				
Purpose of Disbursement IT SERVICES																							
Candidate Name			Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial)

### B. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY			Date of Disbursement  <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>11</td><td></td><td></td><td>01</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	11			01			2025			
M	M	/	D	D	/	Y	Y	Y	Y														
11			01			2025																	
City MOUNTAIN VIEW		State CA	Zip Code 94043																				
Purpose of Disbursement IT SERVICES																							
Candidate Name			Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial)

### C. LA PLAZA STRIP & STORAGE

Mailing Address 320 N BLOOMINGTON ST STE. H			Date of Disbursement  <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>11</td><td></td><td></td><td>01</td><td></td><td></td><td>2025</td><td></td><td></td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	11			01			2025			
M	M	/	D	D	/	Y	Y	Y	Y														
11			01			2025																	
City LOWELL		State AR	Zip Code 72745-9136																				
Purpose of Disbursement STORAGE																							
Candidate Name			Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> 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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 43 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. SAINT GERMAIN CATERING

Mailing Address 8455 TYCO ROAD K

City VIENNA	State VA	Zip Code 22182
----------------	-------------	-------------------

Purpose of Disbursement  
EVENT EXPENSE: CATERING

Candidate Name

Date of Disbursement

M M 11 /  D D 17 /  Y Y Y Y Y  
2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

4521.06

Transaction ID : SB17.I10569

Memo Item

### B. USPS

Mailing Address 401 N 8TH ST

City ROGERS	State AR	Zip Code 72756-9998
----------------	-------------	------------------------

Purpose of Disbursement  
PO BOX RENTAL

Candidate Name

Date of Disbursement

M M 11 /  D D 26 /  Y Y Y Y Y  
2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

226.00

Transaction ID : SB17.I10565

Memo Item

### C. VISA - ARVEST BANK

Mailing Address PO BOX 569200

City DALLAS	State TX	Zip Code 75356-9200
----------------	-------------	------------------------

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMOS

Candidate Name

Date of Disbursement

M M 10 /  D D 01 /  Y Y Y Y Y  
2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2063.18

Transaction ID : SB17.I9478

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

2063.18

**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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 44 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City DALLAS	State TX	Zip Code 75261-9616
----------------	-------------	------------------------

Purpose of Disbursement  
AIRFARE

Candidate Name

Date of Disbursement

M M 08 /  D D 31 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

554.96

Transaction ID : SB17.I9479

Memo Item

### B. AT&T

Mailing Address 4404 W WALNUT STREET  
SUITE 2

City ROGERS	State AR	Zip Code 72756
----------------	-------------	-------------------

Purpose of Disbursement  
PHONE EXPENSE

Candidate Name

Date of Disbursement

M M 09 /  D D 14 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

359.76

Transaction ID : SB17.I9483

Memo Item

### C. DROPBOX

Mailing Address 185 BERRY ST

City SAN FRANCISCO	State CA	Zip Code 94107
-----------------------	-------------	-------------------

Purpose of Disbursement  
IT SERVICES

Candidate Name

Date of Disbursement

M M 09 /  D D 15 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

11.99

Transaction ID : SB17.I9487

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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 45 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW	State CA	Zip Code 94043
-----------------------	-------------	-------------------

Purpose of Disbursement  
IT SERVICES

Candidate Name

Date of Disbursement

M M 09 /  D D 01 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

151.20
--------

Transaction ID : SB17.I9481

Memo Item

### B. LA PLAZA STRIP & STORAGE

Mailing Address 320 N BLOOMINGTON ST  
STE. H

City LOWELL	State AR	Zip Code 72745-9136
----------------	-------------	------------------------

Purpose of Disbursement  
STORAGE RENTAL

Candidate Name

Date of Disbursement

M M 08 /  D D 29 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

70.19
-------

Transaction ID : SB17.I9485

Memo Item

### C. LA PLAZA STRIP & STORAGE

Mailing Address 320 N BLOOMINGTON ST  
STE. H

City LOWELL	State AR	Zip Code 72745-9136
----------------	-------------	------------------------

Purpose of Disbursement  
STORAGE RENTAL

Candidate Name

Date of Disbursement

M M 09 /  D D 03 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

561.55
--------

Transaction ID : SB17.I9486

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

0.00
------

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

0.00
------

# SCHEDULE B (FEC Form 3)

## ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

PAGE 46 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. PLEASANT VALLEY STORAGE

Mailing Address 1703 S 40TH ST

City SPRINGDALE	State AR	Zip Code 72762
--------------------	-------------	-------------------

Purpose of Disbursement  
STORAGE RENTAL

Candidate Name

Date of Disbursement

M M 09 /  D D 01 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

116.00

Transaction ID : SB17.I9482

Memo Item

### B. WINRED

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

Purpose of Disbursement  
EARMARK PROCESSING FEE

Candidate Name

Date of Disbursement

M M 10 /  D D 31 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

Full Name (Last, First, Middle Initial)

FEC Identification Number

C

Amount of Each Disbursement this Period

278.80

Transaction ID : SB17.I10502

Memo Item

### C. WINRED

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

Purpose of Disbursement  
EARMARK PROCESSING FEE

Candidate Name

Date of Disbursement

M M 10 /  D D 20 /  Y Y Y Y Y 2025

Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼
---	--

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

0.03

Transaction ID : SB17.I10505

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

278.83

**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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 47 OF 50

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NAME OF COMMITTEE (In Full)  
Boozman for Arkansas

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. WINRED		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	
Mailing Address PO BOX 9891		<input type="text"/> 10 / <input type="text"/> 14 / <input type="text"/> 2025	
City ARLINGTON		State VA	Zip Code 22219
Purpose of Disbursement EARMARK PROCESSING FEE		<input type="checkbox"/>	
Candidate Name		Category/ Type	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		
Full Name (Last, First, Middle Initial)		Amount of Each Disbursement this Period	
B. WINRED		<input type="text"/> 1.04	
Mailing Address PO BOX 9891		<input type="text"/> Transaction ID : SB17.I10506	
City ARLINGTON		<input type="checkbox"/> Memo Item	
Purpose of Disbursement EARMARK PROCESSING FEE		<input type="checkbox"/>	
Candidate Name		Category/ Type	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		
Full Name (Last, First, Middle Initial)		Amount of Each Disbursement this Period	
C. WINRED		<input type="text"/> 39.45	
Mailing Address PO BOX 9891		<input type="text"/> Transaction ID : SB17.I10549	
City ARLINGTON		<input type="checkbox"/> Memo Item	
Purpose of Disbursement EARMARK PROCESSING FEE		<input type="checkbox"/>	
Candidate Name		Category/ Type	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		
SUBTOTAL of Disbursements This Page (optional).....		<input type="text"/> 79.91	
TOTAL This Period (last page this line number only).....		<input type="text"/>	

# SCHEDULE B (FEC Form 3)

## ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

PAGE 48 OF 50

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
EARMARK PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M M 11 /  D D 17 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

0.07

Transaction ID : SB17.I10551

Memo Item

Full Name (Last, First, Middle Initial)

### B. WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
EARMARK PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M M 11 /  D D 03 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

0.46

Transaction ID : SB17.I10552

Memo Item

Full Name (Last, First, Middle Initial)

### C. WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
EARMARK PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

79.88

Transaction ID : SB17.I10553

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

80.41

**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 Page

FOR LINE NUMBER:  
(check only one)

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

PAGE 49 OF 50

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NAME OF COMMITTEE (In Full)

Boozman for Arkansas

Full Name (Last, First, Middle Initial)

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
EARMARK PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M M 12 /  D D 29 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

19.74

Transaction ID : SB17.I10606

Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
EARMARK PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M M 12 /  D D 08 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

0.12

Transaction ID : SB17.I10607

Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
EARMARK PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M M 12 /  D D 15 /  Y Y Y Y Y 2025

FEC Identification Number

C

Amount of Each Disbursement this Period

139.92

Transaction ID : SB17.I10608

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

159.78

**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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)
Boozman for Arkansas

Full Name (Last, First, Middle Initial)

### A. WINRED

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

Purpose of Disbursement  
EARMARK PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

M  M  
12 /  D  D  
22 /  Y  Y  Y  Y  
2025

FEC Identification Number

C

Amount of Each Disbursement this Period

19.76

Transaction ID : SB17.I10609

Memo Item

### B. REPUBLICAN PARTY OF SALINE COUNTY PAC

Mailing Address 12 ALHAJA WAY

City  
HOT SPRINGS

State  
AR

Zip Code  
71909

Purpose of Disbursement  
EVENT SPONSORSHIP

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.I9500

Memo Item

### C. YELL COUNTY REPUBLICAN COMMITTEE

Mailing Address 10448 MADDIE RD

City  
DARDANELLE

State  
AR

Zip Code  
72834

Purpose of Disbursement  
EVENT SPONSORSHIP

Candidate Name

Category/  
Type

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  
 General  
Other (specify) ▼

State: District:

Date of Disbursement

M  M  
11 /  D  D  
04 /  Y  Y  Y  Y  
2025

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : SB17.I10507

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ►

2319.76

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

50064.50