

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Victoria Doyle for Congress

ADDRESS (number and street)

920 North Golfview Road

Check if different
than previously
reported. (ACC)

Lake Worth Beach

FL

33460

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00904953

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

22

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
05 / 01 / 2025

through

M M / D D / Y Y Y Y
06 / 30 / 2025*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer Doyle, Victoria, , ,

Signature of Treasurer

Doyle, Victoria, , ,

Date

M M / D D / Y Y Y Y
07 / 15 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Victoria Doyle for Congress

Report Covering the Period:

From:

MM / DD / YYYY
05 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025

	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))	15634.01	15634.01
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	15634.01	15634.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	14519.03	14519.03
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	14519.03	14519.03
8. Cash on Hand at Close of Reporting Period (from Line 27)	1134.98	
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)	20.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Victoria Doyle for Congress

Report Covering the Period:

From:

MM / DD / YYYY
05 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

500.00

500.00

(ii) Unitemized

800.00

800.00

(iii) TOTAL of contributions
from individuals ▶

1300.00

1300.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

14334.01

14334.01

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

15634.01

15634.01

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

20.00

20.00

(b) All Other Loans.....

0.00

0.00

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

20.00

20.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

15654.01

15654.01

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.....	14519.03	14519.03
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	14519.03	14519.03

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	15654.01
25. SUBTOTAL (add Line 23 and Line 24).....	15654.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	14519.03
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1134.98

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

PAGE 5 OF 20

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

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)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Burke, Dana, , ,

A.

Mailing Address 5400 W. Dimond Blvd. C-9

City

Anchorage

State

AK

Zip Code

99502

FEC ID number of contributing
federal political committee.

C

Name of Employer
StateOccupation
Attorney

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A-67

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmark via ActBlue on 2025-06-30

B.

Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : A-67CM

Amount of Each Receipt this Period

600.00

☒ Memo ItemEarmarked-Conduit Details. Conduit Contribution Limit
not affected.

C.

Full Name (Last, First, Middle Initial)
Young, Beverly, , ,

Mailing Address 1130 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not EmployedOccupation
Not Employed

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

Transaction ID : A-63

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmark via ActBlue on 2025-06-30

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

500.00

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

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

PAGE 6 OF 20

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

ActBlue

A.

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : A-63CM

Amount of Each Receipt this Period

600.00



Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period



Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period



Memo Item

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

0.00

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

500.00

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

PAGE 7 OF 20

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

A. Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.**C** H6FL22107Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

277.44

Date of Receipt

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

Transaction ID : A-20

Amount of Each Receipt this Period

44.15

☐ Memo Item

IN KIND: website

B. Full Name (Last, First, Middle Initial)
Doyle, Victoria, , ,
Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.**C** H6FL22107Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

277.44

Date of Receipt

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

Transaction ID : A-22

Amount of Each Receipt this Period

45.29

☐ Memo Item

IN KIND: social media

C. Full Name (Last, First, Middle Initial)
Doyle, Victoria, , ,
Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.**C** H6FL22107Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

277.44

Date of Receipt

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

Transaction ID : A-26

Amount of Each Receipt this Period

168.00

☐ Memo Item

IN KIND: website

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

257.44

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

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

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

A. Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.**C** H6FL22107Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5277.44

Date of Receipt

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

Transaction ID : A-42

Amount of Each Receipt this Period

5000.00

☐ Memo Item

IN KIND: political consulting

B. Full Name (Last, First, Middle Initial)
Doyle, Victoria, , ,
Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.**C** H6FL22107Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5709.44

Date of Receipt

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

Transaction ID : A-36

Amount of Each Receipt this Period

432.00

☐ Memo Item

IN KIND: website

C. Full Name (Last, First, Middle Initial)
Doyle, Victoria, , ,
Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.**C** H6FL22107Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9209.44

Date of Receipt

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

Transaction ID : A-38

Amount of Each Receipt this Period

3500.00

☐ Memo Item

IN KIND: fundraising consulting

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

8932.00

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

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

PAGE 9 OF 20

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C H6FL22107

Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9459.44

Date of Receipt

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

Transaction ID : A-30

Amount of Each Receipt this Period

250.00

☐ Memo Item

IN KIND: photography

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C H6FL22107

Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9759.44

Date of Receipt

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

Transaction ID : A-34

Amount of Each Receipt this Period

300.00

☐ Memo Item

IN KIND: photography

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C H6FL22107

Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9892.64

Date of Receipt

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

Transaction ID : A-24

Amount of Each Receipt this Period

133.20

☐ Memo Item

IN KIND: graphic design

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

683.20

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

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

PAGE 10 OF 20

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

A.

Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C H6FL22107

Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10072.64

Date of Receipt

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

Transaction ID : A-28

Amount of Each Receipt this Period

180.00

☐ Memo Item

IN KIND: photography

B.

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C H6FL22107

Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10354.01

Date of Receipt

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

Transaction ID : A-32

Amount of Each Receipt this Period

281.37

☐ Memo Item

IN KIND: travel

C.

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C H6FL22107

Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

14354.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	5	

Transaction ID : A-40

Amount of Each Receipt this Period

4000.00

☐ Memo Item

IN KIND: polling

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

4461.37

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

14334.01

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

PAGE 11 OF 20

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

A. Mailing Address 920 North Golfview Road

City

Lake Worth Beach

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C H6FL22107

Name of Employer
not employedOccupation
not employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20.00

Date of Receipt

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

Transaction ID : A-19

Amount of Each Receipt this Period

20.00

☐ Memo ItemB. Full Name (Last, First, Middle Initial)
Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo ItemC. Full Name (Last, First, Middle Initial)
Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

20.00

20.00

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

PAGE 12 OF 20

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: website

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

44.15

Transaction ID : B-20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: social media

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

45.29

Transaction ID : B-22

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: website

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

168.00

Transaction ID : B-26

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

257.44

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

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

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: political consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B-42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: website

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

432.00

Transaction ID : B-36

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: fundraising consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : B-38

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

8932.00

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

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

Date of Disbursement

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

City
Lake Worth BeachState
FLZip Code
33460

FEC Identification Number

C

Purpose of Disbursement
IN KIND: photography

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : B-30

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

Date of Disbursement

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

City
Lake Worth BeachState
FLZip Code
33460

FEC Identification Number

C

Purpose of Disbursement
IN KIND: photography

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

300.00

Transaction ID : B-34

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

Date of Disbursement

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

City
Lake Worth BeachState
FLZip Code
33460

FEC Identification Number

C

Purpose of Disbursement
IN KIND: graphic design

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

133.20

Transaction ID : B-24

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

683.20

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

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: photography

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

180.00

Transaction ID : B-28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

281.37

Transaction ID : B-32

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Doyle, Victoria, , ,

Mailing Address 920 North Golfview Road

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: polling

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B-40

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

4461.37

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

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. LA Harris & Associates, LLC

Mailing Address 204 Fairfield Drive

City
NicholasvilleState
KYZip Code
40356Purpose of Disbursement
IN KIND: fundraising consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : B-39

☒ Memo Item MEMO: Subvendor of-Victoria Doyle

Full Name (Last, First, Middle Initial)

B. LJR Custom Strategies

Mailing Address 5515 finley street

City
GulfportState
MSZip Code
39501Purpose of Disbursement
IN KIND: polling

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B-41

☒ Memo Item MEMO: Subvendor of-Victoria Doyle

Full Name (Last, First, Middle Initial)

C. Seminole Hard Rock Hotel

Mailing Address 1 Seminole Way

City
DavieState
FLZip Code
33314Purpose of Disbursement
IN KIND: travel

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

281.37

Transaction ID : B-33

☒ Memo Item MEMO: Subvendor of-Victoria Doyle**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Vox Pop Solutions

Mailing Address 16318 McGlamery Road

City
OdessaState
FLZip Code
33556Purpose of Disbursement
IN KIND: political consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B-43

☒ Memo Item MEMO: Subvendor of-Victoria Doyle

Full Name (Last, First, Middle Initial)

B. Whitely, Olen, , ,

Mailing Address 205 North Federal Highway

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: photography

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B-31

☒ Memo Item MEMO: Subvendor of-Victoria Doyle

Full Name (Last, First, Middle Initial)

C. Whitely, Olen, , ,

Mailing Address 205 North Federal Highway

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: photography

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B-35

☒ Memo Item MEMO: Subvendor of-Victoria Doyle**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Whitely, Olen, , ,

Mailing Address 205 North Federal Highway

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
IN KIND: photography

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

180.00

Transaction ID : B-29

☒ Memo Item MEMO: Subvendor of-Victoria Doyle

Full Name (Last, First, Middle Initial)

B. Wix

Mailing Address 500 Terry A Francois Boulevard

City
San FranciscoState
CAZip Code
94158Purpose of Disbursement
IN KIND: website

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

44.14

Transaction ID : B-21

☒ Memo Item MEMO: Subvendor of-Victoria Doyle

Full Name (Last, First, Middle Initial)

C. Wix

Mailing Address 500 Terry A Francois Boulevard

City
San FranciscoState
CAZip Code
94158Purpose of Disbursement
IN KIND: website

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

168.00

Transaction ID : B-27

☒ Memo Item MEMO: Subvendor of-Victoria Doyle**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Wix

Mailing Address 500 Terry A Francois Boulevard

Date of Disbursement

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

City
San FranciscoState
CAZip Code
94158

FEC Identification Number

C

Purpose of Disbursement
IN KIND: website

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

432.00

Transaction ID : B-37

☒ Memo Item MEMO: Subvendor of-Victoria Doyle

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

0.00

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

14334.01

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

PAGE 20 OF 20

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

NAME OF COMMITTEE (In Full)

Transaction ID : C-19

Victoria Doyle for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Doyle, Victoria, , ,

Mailing Address

920 North Golfview Road

City

Lake Worth Beach

State

FL

ZIP Code

33460

☐ Personal Funds of the Candidate

Original Amount of Loan

20.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

20.00

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

20.00

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