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

Fat Matt Smith for Congress

ADDRESS (number and street) ▼ PO BOX 5005

☐ Check if different than previously reported. (ACC)

ABILENE | TX | 79605

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00929604

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

STATE ▼ DISTRICT: TX 19

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 (MM/DD/YYYY) ____ in the State of ____

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

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on (MM/DD/YYYY) ____ in the State of ____

5. Covering Period 10/01/2025 through 12/31/2025

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 PLISHKA, JOHN, , ,

Signature of Treasurer *PLISHKA, JOHN, , ,* Date 01/31/2026

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

Office Use Only							

Image# 202601319808370413

SUMMARY PAGE
of Receipts and Disbursements

FEC **Form 3** (Revised 03/2016)

Write or Type Committee Name

Fat Matt Smith for Congress

Report Covering the Period: From: 10/01/2025 To: 12/31/2025

	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))	12275.60	12275.60
(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))	12275.60	12275.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	126169.32	126169.32
(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))	126169.32	126169.32
8. Cash on Hand at Close of Reporting Period (from Line 27).....	86106.28	
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)	200000.00	

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

Image# 202601319808370414

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 05/2016)

Write or Type Committee Name

Fat Matt Smith for Congress

Report Covering the Period: From: 10/01/2025 To: 12/31/2025

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	10155.13	10155.13
(ii) Unitemized	2120.47	2120.47
(iii) TOTAL of contributions from individuals ▶	12275.60	12275.60
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	12275.60	12275.60
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	200000.00	200000.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	200000.00	200000.00
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) ▶	212275.60	212275.60

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	126169.32	126169.32
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	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) ▶	126169.32	126169.32

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	0.00
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	212275.60
25. SUBTOTAL (add Line 23 and Line 24)	212275.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	126169.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	86106.28

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

A.
Full Name (Last, First, Middle Initial)
WINRED
Mailing Address 4250 FAIRFAX DR
STE 600
City: ARLINGTON | State: VA | Zip Code: 22203-1665
FEC ID number of contributing federal political committee: C C00694323
Name of Employer:
Occupation:
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 12275.60

Date of Receipt: 12 / 31 / 2025
Transaction ID : SA11C.5
Amount of Each Receipt this Period: 12275.60
☒ Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B.
Full Name (Last, First, Middle Initial)
ALDRIDGE, JENNY, , ,
Mailing Address 228 HONEY BEE RD
City: ABILENE | State: TX | Zip Code: 79601-8430
FEC ID number of contributing federal political committee: C
Name of Employer: KELLER WILLIAMS REALTY
Occupation: REALTOR
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 260.25

Date of Receipt: 12 / 30 / 2025
Transaction ID : SA11A.50
Amount of Each Receipt this Period: 260.25
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

C.
Full Name (Last, First, Middle Initial)
CHUNG, STEPHANIE, , ,
Mailing Address 1 STRAWFLOWER
City: LITTLETON | State: CO | Zip Code: 80127-5785
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED
Occupation: RETIRED
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1046.23

Date of Receipt: 12 / 30 / 2025
Transaction ID : SA11A.30
Amount of Each Receipt this Period: 5.21
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 265.46

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

A.
Full Name (Last, First, Middle Initial)
CHUNG, STEPHANIE, , ,
Mailing Address 1 STRAWFLOWER
City: LITTLETON | State: CO | Zip Code: 80127-5785
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED | Occupation: RETIRED
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1046.23

Date of Receipt: 12 / 10 / 2025
Transaction ID : SA11A.56
Amount of Each Receipt this Period: 1041.02
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

B.
Full Name (Last, First, Middle Initial)
DULANEY, DAKOTA, , ,
Mailing Address 1901 , JAMESON
City: ABILENE | State: TX | Zip Code: 79603-1817
FEC ID number of contributing federal political committee: C
Name of Employer: FAT MATT ROOFING | Occupation: SALES
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 520.51

Date of Receipt: 12 / 30 / 2025
Transaction ID : SA11A.31
Amount of Each Receipt this Period: 520.51
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

C.
Full Name (Last, First, Middle Initial)
KLEMENT, DAVID, , ,
Mailing Address 2026 PRIMROSE DRIVE
City: IRVING | State: TX | Zip Code: 75063-8438
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED | Occupation: ADVERTISING
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1041.02

Date of Receipt: 12 / 30 / 2025
Transaction ID : SA11A.42
Amount of Each Receipt this Period: 1041.02
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 2602.55

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

A.
Full Name (Last, First, Middle Initial)
SMITH, PAMELA, , ,
Mailing Address 111 KLEINGRASS RD
City: ABILENE | State: TX | Zip Code: 79606-2371
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED | Occupation: RETIRED
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify) ▼
Election Cycle-to-Date ▼ 3643.56

Date of Receipt: 12 / 31 / 2025
Transaction ID : SA11A.16
Amount of Each Receipt this Period: 3643.56
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED; SEE REDESIGNATION

B.
Full Name (Last, First, Middle Initial)
SMITH, PAMELA, , ,
Mailing Address 111 KLEINGRASS RD
City: ABILENE | State: TX | Zip Code: 79606-2371
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED | Occupation: RETIRED
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify) ▼
Election Cycle-to-Date ▼ 3643.56

Date of Receipt: 12 / 31 / 2025
Transaction ID : SA11A.1063
Amount of Each Receipt this Period: – 143.56
☒ Memo Item
CONTRIBUTION
REDESIGNATION TO RUNOFF

C.
Full Name (Last, First, Middle Initial)
SMITH, PAMELA, , ,
Mailing Address 111 KLEINGRASS RD
City: ABILENE | State: TX | Zip Code: 79606-2371
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED | Occupation: RETIRED
Receipt For: 2026
☐ Primary ☐ General ☒ Other (specify) ▼ RUNOFF
Election Cycle-to-Date ▼ 3643.56

Date of Receipt: 12 / 31 / 2025
Transaction ID : SA11A.1064
Amount of Each Receipt this Period: 143.56
☒ Memo Item
CONTRIBUTION
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional) ▶ 3643.56

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

A.
Full Name (Last, First, Middle Initial)
SMITH, TIMOTHY, , ,
Mailing Address 111 KLEINGRASS ROAD
City: ABILENE | State: TX | Zip Code: 79606-2371
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED
Occupation: REAL ESTATE INVESTOR
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3643.56

Date of Receipt: 12 / 31 / 2025
Transaction ID : SA11A.17
Amount of Each Receipt this Period: 3643.56
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED; SEE REDESIGNATION

B.
Full Name (Last, First, Middle Initial)
SMITH, TIMOTHY, , ,
Mailing Address 111 KLEINGRASS ROAD
City: ABILENE | State: TX | Zip Code: 79606-2371
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED
Occupation: REAL ESTATE INVESTOR
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3643.56

Date of Receipt: 12 / 31 / 2025
Transaction ID : SA11A.1061
Amount of Each Receipt this Period: – 143.56
☒ Memo Item
CONTRIBUTION
REDESIGNATION TO RUNOFF

C.
Full Name (Last, First, Middle Initial)
SMITH, TIMOTHY, , ,
Mailing Address 111 KLEINGRASS ROAD
City: ABILENE | State: TX | Zip Code: 79606-2371
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED
Occupation: REAL ESTATE INVESTOR
Receipt For: 2026
☐ Primary ☐ General ☒ Other (specify) RUNOFF
Election Cycle-to-Date: 3643.56

Date of Receipt: 12 / 31 / 2025
Transaction ID : SA11A.1062
Amount of Each Receipt this Period: 143.56
☒ Memo Item
CONTRIBUTION
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional) ▶ 3643.56

TOTAL This Period (last page this line number only) ▶ 10155.13

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

A.
Full Name (Last, First, Middle Initial)
SMITH, MATTHEW, , ,
Mailing Address PO BOX 5005
City: ABILENE | State: TX | Zip Code: 79605
FEC ID number of contributing federal political committee: C H6TX19263
Name of Employer: CANDIDATE
Occupation: CANDIDATE
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify) ▼
Election Cycle-to-Date ▼ 200000.00

Date of Receipt: M M 12 / D D 04 / Y Y Y Y 2025
Transaction ID : SA13A.001
Amount of Each Receipt this Period: 200000.00
☐ Memo Item
CANDIDATE LOAN
PERSONAL FUNDS

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) ▶ 200000.00

TOTAL This Period (last page this line number only) ▶ 200000.00

Image# 202601319808370421

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

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

A. Full Name (Last, First, Middle Initial)
AXMEDIA

Mailing Address 800 W 47TH ST STE 200

City: KANSAS CITY | State: MO | Zip Code: 64112

Purpose of Disbursement: MEDIA

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 42065.00

Transaction ID : SB17.01

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
AXMEDIA

Mailing Address 800 W 47TH ST STE 200

City: KANSAS CITY | State: MO | Zip Code: 64112

Purpose of Disbursement: MEDIA

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 19 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 83470.00

Transaction ID : SB17.08

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
CHAIN BRIDGE BANK

Mailing Address 1445A LAUGHLIN AVE

City: MCLEAN | State: VA | Zip Code: 22101

Purpose of Disbursement: BANK FEE

Candidate Name

Category/ Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 12 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 25.00

Transaction ID : SB17.02

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 125560.00

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

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

A. Full Name (Last, First, Middle Initial)
CHAIN BRIDGE BANK
Mailing Address 1445A LAUGHLIN AVE
City: MCLEAN | State: VA | Zip Code: 22101
Purpose of Disbursement: BANK FEE
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 19 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 25.00
Transaction ID : SB17.07
☐ Memo Item

B. Full Name (Last, First, Middle Initial)
INTUIT
Mailing Address 2700 COAST AVE
City: MOUNTAIN VIEW | State: CA | Zip Code: 94043
Purpose of Disbursement: SOFTWARE SUBSCRIPTION
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 17 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 57.50
Transaction ID : SB17.05
☐ Memo Item

C. Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 4250 FAIRFAX DR SUITE 600
City: ARLINGTON | State: VA | Zip Code: 22203
Purpose of Disbursement: CREDIT CARD MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 09 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 4.10
Transaction ID : SB17.03
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 86.60

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

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

A.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 4250 FAIRFAX DR SUITE 600
City: ARLINGTON | State: VA | Zip Code: 22203
Purpose of Disbursement: CREDIT CARD MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 12 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 42.01
Transaction ID : SB17.04
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 4250 FAIRFAX DR SUITE 600
City: ARLINGTON | State: VA | Zip Code: 22203
Purpose of Disbursement: CREDIT CARD MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 17 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 1.03
Transaction ID : SB17.06
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 4250 FAIRFAX DR SUITE 600
City: ARLINGTON | State: VA | Zip Code: 22203
Purpose of Disbursement: CREDIT CARD MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 19 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 4.10
Transaction ID : SB17.09
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 47.14

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

Image# 202601319808370424

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

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

A.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 4250 FAIRFAX DR SUITE 600
City: ARLINGTON | State: VA | Zip Code: 22203
Purpose of Disbursement: CREDIT CARD MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 31 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 1.03
Transaction ID : SB17.10
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 4250 FAIRFAX DR SUITE 600
City: ARLINGTON | State: VA | Zip Code: 22203
Purpose of Disbursement: CREDIT CARD MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 31 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 43.27
Transaction ID : SB17.11
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 4250 FAIRFAX DR SUITE 600
City: ARLINGTON | State: VA | Zip Code: 22203
Purpose of Disbursement: CREDIT CARD MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 31 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 346.45
Transaction ID : SB17.12
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 390.75

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)
Fat Matt Smith for Congress

A.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 4250 FAIRFAX DR SUITE 600
City: ARLINGTON | State: VA | Zip Code: 22203
Purpose of Disbursement: CREDIT CARD MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 12 / 31 / 2025
FEC Identification Number: C
Amount of Each Disbursement this Period: 84.83
Transaction ID : SB17.13
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
Purpose of Disbursement
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
FEC Identification Number: C
Amount of Each Disbursement this Period:
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 84.83

TOTAL This Period (last page this line number only) ▶ 126169.32

Image# 202601319808370426

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)
- [X] 13a
- [ ] 13b

NAME OF COMMITTEE (In Full)
Fat Matt Smith for Congress

Transaction ID : SC10.01

LOAN SOURCE Full Name (Last, First, Middle Initial)
SMITH, MATTHEW, , ,

[ ] Memo Item

Mailing Address
PO BOX 5005

City: ABILENE | State: TX | ZIP Code: 79605

Election: 2026
- [X] Primary
- [ ] General
- [ ] Other (specify) ▼

[X] Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	0.00	200000.00

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate (If none, enter 0)	Secured:
12/04/2025	12/31/2026	0.00 % (apr)	[ ] Yes [X] No

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

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	200000.00
TOTALS This Period (last page in this line only) ▶	200000.00

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