# FEC FORM 3P

# REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

**1. NAME OF COMMITTEE** (in full, type or print)

Example: If typing, type over the lines. 12FE4M5

Chase Oliver for President

ADDRESS (number and street) 3939 Lavista Rd

Ste E #368

☐ Check if different than previously reported. (ACC)

Tucker | GA | 30084 –

CITY | STATE | ZIP CODE

**2. FEC IDENTIFICATION NUMBER** ▶ C C00837625

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

Check here if this is a Termination Report (TER) ☐

Quarterly Reports:

- ☐ April 15 (Q1)
- ☒ October 15 (Q3)
- ☐ July 15 (Q2)
- ☐ January 31 Year-End Report (YE)

Monthly Reports:

- ☐ Feb 20 (M2)
- ☐ May 20 (M5)
- ☐ Aug 20 (M8)
- ☐ Nov 20 (M11)
- ☐ Mar 20 (M3)
- ☐ Jun 20 (M6)
- ☐ Sep 20 (M9)
- ☐ Dec 20 (M12)
- ☐ Apr 20 (M4)
- ☐ Jul 20 (M7)
- ☐ Oct 20 (M10))
- ☐ Jan 31 (YE)

☐ 12-Day Pre-Election Report for the Election on M M / D D / Y Y Y Y in the State of

☐ 30-Day Post-Election Report for the General Election on M M / D D / Y Y Y Y

**4. IS THIS REPORT AN AMENDMENT?** ☐ yes ☒ no

**5. COVERING PERIOD** 07 / 01 / 2025 **THROUGH** 09 / 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 Hagan, Timothy, , ,

Signature of Treasurer *Hagan, Timothy, , ,* Date 10 / 10 / 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. All previous versions of this form are obsolete and should no longer be used.

| Office Use Only | | | | | | | |
|---|---|---|---|---|---|---|---|

FEC **Form 3P** (Rev. 05/2016)

Write or Type Committee Name

# Chase Oliver for President

Report Covering the Period: From: 07 / 01 / 2025 To: 09 / 30 / 2025

## SUMMARY

| | | |
|---|---|---|
| 6. | CASH ON HAND AT BEGINNING OF REPORTING PERIOD | 339.56 |
| 7. | TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) | 0.00 |
| 8. | SUBTOTAL (Lines 6 and 7) | 339.56 |
| 9. | TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 4) | 507.73 |
| 10. | CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8) | – 168.17 |
| 11. | DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 0.00 |
| 12. | DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 45731.94 |
| 13. | EXPENDITURES SUBJECT TO LIMIITATION (Use the worksheet on Page 8 to calculate this amount.) | 0.00 |

## NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

| | | |
|---|---|---|
| 14. | NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B on Page 4 from 17e, Column B on Page 3) | 468406.10 |
| 15. | NET OPERATING EXPENDITURES (Subtract Line 20a, Column B on Page 3 from 23, Column B on Page 4) | 428877.81 |

Image# 202510119790744422

# DETAILED SUMMARY PAGE

FEC **Form 3P** (Rev. 05/2016) of Receipts

NAME OF COMMITEE (in Full)

Chase Oliver for President

Report Covering the Period: From: 07 / 01 / 2025 To: 09 / 30 / 2025

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|---|---|
| 16. FEDERAL FUNDS (Itemize on Schedule A-P) | 0.00 | 0.00 |
| 17. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) itemized | 0.00 | 313826.15 |
| (ii) unitemized | 0.00 | 152855.16 |
| (iii) Total contributions | 0.00 | 466681.31 |
| (b) Political Party Committees | 0.00 | 1414.99 |
| (c) Other Political Committees | 0.00 | 309.80 |
| (d) The Candidate | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)) | 0.00 | 468406.10 |
| 18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOANS RECEIVED: | | |
| (a) Loans Received From or Guaranteed by Candidate | 0.00 | 0.00 |
| (b) Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOANS (Add 19(a) and 19(b) | 0.00 | 0.00 |
| 20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.): | | |
| (a) Operating | 0.00 | 403.09 |
| (b) Fundraising | 0.00 | 0.00 |
| (c) Legal and Accounting | 0.00 | 0.00 |
| (d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c)) | 0.00 | 403.09 |
| 21. OTHER RECEIPTS (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21) | 0.00 | 468809.19 |

Image# 202510119790744423

# DETAILED SUMMARY PAGE

FEC **Form 3P** (Rev. 05/2016) of Disbursements and Contributed Items

NAME OF COMMITEE (in Full)
Chase Oliver for President

Report Covering the Period: From: 07 / 01 / 2025 To: 09 / 30 / 2025

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|---|---|
| 23. OPERATING EXPENDITURES | 507.73 | 429280.90 |
| 24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 25. FUNDRAISING DISBURSEMENTS | 0.00 | 34454.70 |
| 26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS | 0.00 | 0.00 |
| 27. LOAN REPAYMENTS MADE: | | |
| (a) Repayments of Loans made or Guaranteed by Candidate | 0.00 | 0.00 |
| (b) Other Repayments | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) | 0.00 | 0.00 |
| 28. 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 | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c)) | 0.00 | 0.00 |
| 29. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) | 507.73 | 463735.60 |

| III. CONTRIBUTED ITEMS (Stock, Art Objects, Etc.) | | |
|---|---|---|
| 31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) | 0.00 | |

FEC **Form 3P** (Rev. 05/2016)
Federal Election Commission
1050 First Street, N.E.
Washington, D.C.

# ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE

(Used Only by Primary Committees Receiving or Expecting To Receive Federal Funds)



**1. NAME OF COMMITTEE** (in full, type or print)

Chase Oliver for President

**2. FEC IDENTIFICATION NUMBER** C C00837625

ADDRESS (number and street) 3939 Lavista Rd
Ste E #368

Tucker (CITY) | GA (STATE) | 30084 – (ZIP CODE)

**3. NAME OF CANDIDATE**

## ALLOCATION BY STATE

| *STATE* | *ALLOCATION This Period* | *TOTAL ALLOCATION To Date* |
|---|---|---|
| Alabama | 0.00 | 0.00 |
| Alaska | 0.00 | 0.00 |
| Arizona | 0.00 | 0.00 |
| Arkansas | 0.00 | 0.00 |
| California | 0.00 | 0.00 |
| Colorado | 0.00 | 0.00 |
| Connecticut | 0.00 | 0.00 |
| Delaware | 0.00 | 0.00 |
| District of Columbia | 0.00 | 0.00 |
| Florida | 0.00 | 0.00 |
| Georgia | 0.00 | 0.00 |
| Hawaii | 0.00 | 0.00 |
| Idaho | 0.00 | 0.00 |
| Illinois | 0.00 | 0.00 |

| STATE | ALLOCATION This Period | TOTAL ALLOCATION To Date |
|---|---|---|
| Indiana | 0.00 | 0.00 |
| Iowa | 0.00 | 0.00 |
| Kansas | 0.00 | 0.00 |
| Kentucky | 0.00 | 0.00 |
| Louisiana | 0.00 | 0.00 |
| Maine | 0.00 | 0.00 |
| Maryland | 0.00 | 0.00 |
| Massachusetts | 0.00 | 0.00 |
| Michigan | 0.00 | 0.00 |
| Minnesota | 0.00 | 0.00 |
| Mississippi | 0.00 | 0.00 |
| Missouri | 0.00 | 0.00 |
| Montana | 0.00 | 0.00 |
| Nebraska | 0.00 | 0.00 |
| Nevada | 0.00 | 0.00 |
| New Hampshire | 0.00 | 0.00 |
| New Jersey | 0.00 | 0.00 |
| New Mexico | 0.00 | 0.00 |
| New York | 0.00 | 0.00 |
| North Carolina | 0.00 | 0.00 |
| North Dakota | 0.00 | |
| Ohio | 0.00 | 0.00 |
| Oklahoma | 0.00 | 0.00 |
| Oregon | 0.00 | 0.00 |
| Pennsylvania | 0.00 | 0.00 |

| STATE | ALLOCATION This Period | TOTAL ALLOCATION To Date |
|---|---|---|
| Rhode Island | 0.00 | 0.00 |
| South Carolina | 0.00 | 0.00 |
| South Dakota | 0.00 | 0.00 |
| Tennessee | 0.00 | 0.00 |
| Texas | 0.00 | 0.00 |
| Utah | 0.00 | 0.00 |
| Vermont | 0.00 | 0.00 |
| Virginia | 0.00 | 0.00 |
| Washington | 0.00 | 0.00 |
| West Virginia | 0.00 | 0.00 |
| Wisconsin | 0.00 | 0.00 |
| Wyoming | 0.00 | 0.00 |
| Puerto Rico | 0.00 | 0.00 |
| Guam | 0.00 | 0.00 |
| Virgin Islands | 0.00 | 0.00 |
| TOTALS | 0.00 | 0.00 |

Image# 202510119790744427

# SCHEDULE B–P
# ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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)
Chase Oliver for President

**A.** Full Name (Last, First, Middle Initial)
Google
Mailing Address 1600 Amphitheatre Parkway
City: Mountain View | State: CA | Zip Code: 94043
Purpose of Disbursement: Google Workspace account
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 07 / 02 / 2025
FEC Identification Number: C
**Transaction ID : SB23.21825**
Amount of Each Disbursement this Period: 161.28
☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)
Google
Mailing Address 1600 Amphitheatre Parkway
City: Mountain View | State: CA | Zip Code: 94043
Purpose of Disbursement: Google Workspace account
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 04 / 2025
FEC Identification Number: C
**Transaction ID : SB23.21829**
Amount of Each Disbursement this Period: 117.60
☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)
Google
Mailing Address 1600 Amphitheatre Parkway
City: Mountain View | State: CA | Zip Code: 94043
Purpose of Disbursement: Google Workspace account
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 09 / 02 / 2025
FEC Identification Number: C
**Transaction ID : SB23.21831**
Amount of Each Disbursement this Period: 117.60
☐ Memo Item

**Subtotal Of Receipts This Page** (optional) ▶ 396.48

**Total This Period** (last page this line number only)) ▶

Image# 202510119790744428

# SCHEDULE B–P
# ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
Chase Oliver for President

**A.** Full Name (Last, First, Middle Initial)
Truist Bank
Mailing Address 214 North Tryon St
City: Charlotte | State: NC | Zip Code: 28202
Purpose of Disbursement: Bank fee
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 07 / 21 / 2025
FEC Identification Number: C
**Transaction ID : SB23.21828**
Amount of Each Disbursement this Period: 15.00
☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)
Truist Bank
Mailing Address 214 North Tryon St
City: Charlotte | State: NC | Zip Code: 28202
Purpose of Disbursement: Bank fee
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 21 / 2025
FEC Identification Number: C
**Transaction ID : SB23.21830**
Amount of Each Disbursement this Period: 15.00
☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)
Truist Bank
Mailing Address 214 North Tryon St
City: Charlotte | State: NC | Zip Code: 28202
Purpose of Disbursement: Bank fee
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 09 / 02 / 2025
FEC Identification Number: C
**Transaction ID : SB23.21832**
Amount of Each Disbursement this Period: 36.00
☐ Memo Item

**Subtotal Of Receipts This Page** (optional) ▶ 66.00

**Total This Period** (last page this line number only)) ▶

Image# 202510119790744429

# SCHEDULE B–P
# ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 23 ☐ 24 ☐ 25 ☐ 26 ☐ 27a
☐ 27b ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
Chase Oliver for President

**A.**
Full Name (Last, First, Middle Initial)
Truist Bank
Mailing Address 214 North Tryon St
City: Charlotte | State: NC | Zip Code: 28202
Purpose of Disbursement: Bank fee
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024
☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 09 / 22 / 2025
FEC Identification Number: C
**Transaction ID : SB23.21833**
Amount of Each Disbursement this Period: 15.00
☐ Memo Item

**B.**
Full Name (Last, First, Middle Initial)
Wix
Mailing Address 40 Namal Tel Aviv St
City: Tel Aviv | State: ZZ | Zip Code:
Purpose of Disbursement: Website services
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2024
☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 07 / 10 / 2025
FEC Identification Number: C
**Transaction ID : SB23.21827**
Amount of Each Disbursement this Period: 27.25
☐ 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 Receipts This Page** (optional) ▶ 42.25

**Total This Period** (last page this line number only)) ▶ 504.73

Image# 202510119790744430

# SCHEDULE D–P

## DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 11 ☒ 12

NAME OF COMMITTEE (In Full)

Chase Oliver for President

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Cordova, Gabrielle, , ,

Mailing Address 18676 Noble Caspian Dr

City: Lutz | State: FL | Zip Code: 33558

Nature of Debt (Purpose): Media Consulting

Transaction ID : SD12.20772

Outstanding Balance Beginning This Period: 2333.33

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 2333.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Crowder, Joshua, , ,

Mailing Address 120 Biscayne Dr NW Apt C16

City: Atlanta | State: GA | Zip Code: 30309

Nature of Debt (Purpose): General Campaign Consulting and Travel

Transaction ID : SD12.20771

Outstanding Balance Beginning This Period: 1943.98

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 1943.98

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Crowe, Casey, , ,

Mailing Address 2004 Shadowood Ct

City: Columbia | State: SC | Zip Code: 29212

Nature of Debt (Purpose): IT Consulting

Transaction ID : SD12.20767

Outstanding Balance Beginning This Period: 2000.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 2000.00

1) **SUBTOTALS** This Period This Page (optional) ▶ 6277.31

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only) ▶

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

Image# 202510119790744431

# SCHEDULE D–P

## DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 11 ☒ 12

NAME OF COMMITTEE (In Full)

Chase Oliver for President

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Howell, Amber, , ,

Mailing Address 1540 Reed Creek School Rd.

City: Hartwell | State: GA | Zip Code: 30643

Nature of Debt (Purpose): Media Consulting

Transaction ID : SD12.20773

Outstanding Balance Beginning This Period: 3019.53

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 3019.53

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Kosin, Brittany, , ,

Mailing Address 2265 Sand Trap Rd

City: Jamison | State: PA | Zip Code: 18929

Nature of Debt (Purpose): Campaign material handling

Transaction ID : SD12.20778

Outstanding Balance Beginning This Period: 3500.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Libertas Excelsior Consulting, LLC

Mailing Address 9701 Montgomery Blvd NE #1009

City: Albuquerque | State: NM | Zip Code: 87111

Nature of Debt (Purpose): Organizing & Outreach Consulting

Transaction ID : SD12.20777

Outstanding Balance Beginning This Period: 5500.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 5500.00

1) **SUBTOTALS** This Period This Page (optional) ▶ 12019.53

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only) ▶

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

Image# 202510119790744432

# SCHEDULE D–P

## DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 11 ☒ 12

NAME OF COMMITTEE (In Full)

Chase Oliver for President

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LRH Media

Mailing Address 4343 Manning Rd

City: Indianapolis | State: IN | Zip Code: 46228

Nature of Debt (Purpose): Digital Strategist & Social Media Consulting

**Transaction ID : SD12.20769**

Outstanding Balance Beginning This Period: 3666.70

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 3666.70

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Lyon, Kelsey, , ,

Mailing Address 207 YOUNG ST

City: GREENVILLE | State: SC | Zip Code: 29609

Nature of Debt (Purpose): Reimbursable Travel

**Transaction ID : SD12.20774**

Outstanding Balance Beginning This Period: 236.23

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 236.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MacCutcheon, Michelle, , ,

Mailing Address 18 Ross St

City: Lebanon | State: OH | Zip Code: 45036

Nature of Debt (Purpose): Volunteer Coordinator Consulting

**Transaction ID : SD12.20770**

Outstanding Balance Beginning This Period: 1500.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 1500.00

1) **SUBTOTALS** This Period This Page (optional) ▶ 5402.93

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only) ▶

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

Image# 202510119790744433

# SCHEDULE D–P

## DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 11 ☒ 12

NAME OF COMMITTEE (In Full)

Chase Oliver for President

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Murphy, Evan, , ,

Mailing Address 1660 Madison Ave
Apt 6B

City: New York | State: NY | Zip Code: 11201

Nature of Debt (Purpose): Social Media Consulting

Transaction ID : SD12.20768

Outstanding Balance Beginning This Period: 1420.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 1420.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sept 17, LLC

Mailing Address PO Box 11186

City: Indianapolis | State: IN | Zip Code: 46201

Nature of Debt (Purpose): Commission

Transaction ID : SD12.16483

Outstanding Balance Beginning This Period: 12144.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 12144.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sept 17, LLC

Mailing Address PO Box 11186

City: Indianapolis | State: IN | Zip Code: 46201

Nature of Debt (Purpose): Commission

Transaction ID : SD12.18686

Outstanding Balance Beginning This Period: 7300.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 7300.00

1) **SUBTOTALS** This Period This Page (optional) ▶ 20864.00

2) **TOTALS** This Period (last page this line number only) ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only) ▶

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

Image# 202510119790744434

# SCHEDULE D–P

## DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) ☐ 11 ☒ 12

NAME OF COMMITTEE (In Full)

Chase Oliver for President

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Sharlow, Sheri, Conover, ,

Mailing Address 609 W Spencer Ave

City: Marion | State: IN | Zip Code: 46952

Nature of Debt (Purpose): Media Consulting

**Transaction ID : SD12.20775**

Outstanding Balance Beginning This Period: 1000.00

Amount Incurred This Period: 0.00

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Truist Bank

Mailing Address 214 North Tryon St

City: Charlotte | State: NC | Zip Code: 28202

Nature of Debt (Purpose): overdraft

**Transaction ID : SD12.21834**

Outstanding Balance Beginning This Period: 0.00

Amount Incurred This Period: 168.17

Payment This Period: 0.00

Outstanding Balance at Close of This Period: 168.17

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City | State | Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period:

Amount Incurred This Period:

Payment This Period:

Outstanding Balance at Close of This Period:

| | |
|---|---|
| 1) **SUBTOTALS** This Period This Page (optional) | 1168.17 |
| 2) **TOTALS** This Period (last page this line number only) | 45731.94 |
| 3) **TOTAL OUTSTANDING LOANS** from Schedule C-P (last page only) | 0.00 |
| 4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) | 45731.94 |