

**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

Fox for WA

ADDRESS (number and street)

PO Box 4026

Check if different
than previously
reported. (ACC)

Bremerton

WA

98312

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00939926

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

WA

06

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
08 / 04 / 2026in the
State of

WA

(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
07 / 01 / 2026

through

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

Perry, Tom, , ,

Signature of Treasurer

Perry, Tom, , ,

Date

M M / D D / Y Y Y Y
07 / 23 / 2026

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Fox for WA

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2026

To:

M M / D D / Y Y Y Y
07 15 2026

	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))	4198.05	20100.02
(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))	4198.05	20100.02
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2829.16	24593.90
(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))	2829.16	24593.90
8. Cash on Hand at Close of Reporting Period (from Line 27)	2836.12	
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)	12343.78	

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

Fox for WA

Report Covering the Period:

From:

MM / DD / YYYY
07 / 01 / 2026

To:

MM / DD / YYYY
07 / 15 / 2026**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).....

2511.00

10604.24

(ii) Unitemized

1687.05

8475.78

(iii) TOTAL of contributions
from individuals ▶

4198.05

19080.02

(b) Political Party Committees.....

0.00

1000.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

20.00

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

4198.05

20100.02

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

510.00

7515.00

(b) All Other Loans.....

0.00

0.00

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

510.00

7515.00

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)..... ▶

4708.05

27615.02

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.....	2829.16	24593.90
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	185.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2829.16	24778.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	957.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	4708.05
25. SUBTOTAL (add Line 23 and Line 24).....	5665.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2829.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2836.12

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 23

☒ 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)

Fox for WA

Full Name (Last, First, Middle Initial)

Jensen, Marlyn, , ,

A.

Mailing Address PO Box 2749

City

Gig Harbor

State

WA

Zip Code

98335

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 09 2026

Transaction ID : A-308

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carlin, Sonja, , ,

B.

Mailing Address 11709 51st Ave NW

City

Gig Harbor

State

WA

Zip Code

98332

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

604.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 14 2026

Transaction ID : A-294

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gray, Bethany, , ,

C.

Mailing Address 6332 Troon Ave SW

City

Port Orchard

State

WA

Zip Code

98367

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 15 2026

Transaction ID : A-325

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

1050.00

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:
(check only one)

PAGE 6 OF 23

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

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NAME OF COMMITTEE (In Full)

Fox for WA

Full Name (Last, First, Middle Initial)

Randall, Irene, , ,

A. Mailing Address 421 NW Westmont Ln

City
Bremerton

State
WA

Zip Code
98311

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1461.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 15 2026

Transaction ID : A-328

Amount of Each Receipt this Period

961.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Skagen, Roy, , ,

B. Mailing Address 16212 Bothell Everett Hwy
Ste F PMB 272

City
Mill Creek

State
WA

Zip Code
98012

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 15 2026

Transaction ID : A-320

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

1461.00

2511.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 23

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

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NAME OF COMMITTEE (In Full)

Fox for WA

Full Name (Last, First, Middle Initial)

Fox, Teresa, , ,

A. Mailing Address 1735 Shorewood Dr

City
Bremerton

State
WA

Zip Code
98312

FEC ID number of contributing
federal political committee.

C H6WA06286

Name of Employer
BDBS

Occupation
Safety Officer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7385.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 09 / 2026

Transaction ID : A-309

Amount of Each Receipt this Period

360.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Fox, Teresa, , ,

B. Mailing Address 1735 Shorewood Dr

City
Bremerton

State
WA

Zip Code
98312

FEC ID number of contributing
federal political committee.

C H6WA06286

Name of Employer
BDBS

Occupation
Safety Officer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7535.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 10 / 2026

Transaction ID : A-318

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

510.00

510.00

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

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

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

PAGE 8 OF 23

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

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NAME OF COMMITTEE (In Full)

Fox for WA

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit card fees

001

Candidate Name

Category/
Type

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	7		0	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4.30

Transaction ID : B-156

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bremerton Air Show

Mailing Address 8850 State Highway 3

City
BremertonState
WAZip Code
98312Purpose of Disbursement
Event booth

001

Candidate Name

Category/
Type

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	7		0	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

257.50

Transaction ID : B-354

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit card fees

001

Candidate Name

Category/
Type

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	7		0	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2.30

Transaction ID : B-157

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

264.10

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

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

PAGE 9 OF 23

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Fox for WA

Full Name (Last, First, Middle Initial)

A. Amazon

Mailing Address PO Box 81226

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2026

City
SeattleState
WAZip Code
98108

FEC Identification Number

C

Purpose of Disbursement
Event supplies

003

Amount of Each Disbursement this Period

31.65

Transaction ID : B-355

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Amazon

Mailing Address PO Box 81226

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2026

City
SeattleState
WAZip Code
98108

FEC Identification Number

C

Purpose of Disbursement
Event supplies

003

Amount of Each Disbursement this Period

131.03

Transaction ID : B-356

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Kitsap Golf & Country Club

Mailing Address 3885 NW Golf Club Hill Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		07		2026

City
BremertonState
WAZip Code
98312

FEC Identification Number

C

Purpose of Disbursement
Event catering

003

Amount of Each Disbursement this Period

1000.00

Transaction ID : B-90

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1162.68

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

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

PAGE 10 OF 23

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

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NAME OF COMMITTEE (In Full)

Fox for WA

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit card fees

001

Candidate Name

Category/
Type

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	7		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

8.90

Transaction ID : B-158

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Washington State Republican PartyMailing Address 11911 NE 1st St
Ste 201City
BellevueState
WAZip Code
98005Purpose of Disbursement
Convention fee

011

Candidate Name

Category/
Type

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	7		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-331

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amazon

Mailing Address PO Box 81226

City
SeattleState
WAZip Code
98108Purpose of Disbursement
Event supplies

003

Candidate Name

Category/
Type

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	7		0	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

52.14

Transaction ID : B-357

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

561.04

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

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

PAGE 11 OF 23

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Fox for WA

Full Name (Last, First, Middle Initial)

A. Pinnacle PrintingMailing Address 11012 Canyon Rd E
Ste 8 PMB 817City
PuyallupState
WAZip Code
98373Purpose of Disbursement
Remit envelopes

003

Candidate Name

Category/
Type

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	7		1	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

396.36

Transaction ID : B-91

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit card fees

001

Candidate Name

Category/
Type

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	7		1	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

6.60

Transaction ID : B-159

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AnedotMailing Address 1340 Poydras St
Ste 1770City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit card fees

001

Candidate Name

Category/
Type

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	7		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

8.60

Transaction ID : B-160

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

411.56

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

2399.38

SCHEDULE C (FEC Form 3)
LOANS

PAGE 12 OF 23

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-199

Fox for WA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Fox, Teresa, , ,

Mailing Address

1735 Shorewood Dr

City

Bremerton

State

WA

ZIP Code

98312

☒ Personal Funds of the Candidate

Original Amount of Loan

805.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

805.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 08 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

805.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 13 OF 23

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-195

Fox for WA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Fox, Teresa, , ,

Mailing Address

1735 Shorewood Dr

City

Bremerton

State

WA

ZIP Code

98312

☒ Personal Funds of the Candidate

Original Amount of Loan

400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

400.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 16 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

400.00

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

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

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

PAGE 14 OF 23

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

NAME OF COMMITTEE (In Full)

Transaction ID : C-207

Fox for WA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Fox, Teresa, , ,

Mailing Address

1735 Shorewood Dr

City

Bremerton

State

WA

ZIP Code

98312

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 / 22 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 15 OF 23

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-209

Fox for WA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Fox, Teresa, , ,

Mailing Address

1735 Shorewood Dr

City

Bremerton

State

WA

ZIP Code

98312

☒ Personal Funds of the Candidate

Original Amount of Loan

800.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

800.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
06 21 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

800.00

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

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

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

PAGE 16 OF 23

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

NAME OF COMMITTEE (In Full)

Transaction ID : C-309

Fox for WA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Fox, Teresa, , ,

Mailing Address

1735 Shorewood Dr

City

Bremerton

State

WA

ZIP Code

98312

☒ Personal Funds of the Candidate

Original Amount of Loan

360.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

360.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 09 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

360.00

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

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

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

PAGE 17 OF 23

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

NAME OF COMMITTEE (In Full)

Transaction ID : C-318

Fox for WA

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Fox, Teresa, , ,

Mailing Address

1735 Shorewood Dr

City

Bremerton

State

WA

ZIP Code

98312

☒ Personal Funds of the Candidate

Original Amount of Loan

150.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

150.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 10 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

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

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

150.00

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

7515.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 18 OF 23

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fox for WA

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

PO box rental

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

70.00

Transaction ID : D-369

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

70.00

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Event fee

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

93.26

Transaction ID : D-341

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

93.26

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Meal

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

18.20

Transaction ID : D-371

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.20

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

181.46

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 19 OF 23

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fox for WA

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Creepers, pads, supplies for events

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

255.08

Transaction ID : D-347

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

255.08

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Postage

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

15.60

Transaction ID : D-373

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15.60

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Event food

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

56.95

Transaction ID : D-375

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

56.95

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

327.63

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 20 OF 23

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fox for WA

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Lodging

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

141.00

Transaction ID : D-377

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

141.00

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Postage

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

31.20

Transaction ID : D-343

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

31.20

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Gas

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

129.07

Transaction ID : D-359

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

129.07

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

301.27

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 21 OF 23

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fox for WA

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Gas

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

64.98

Transaction ID : D-345

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

64.98

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

Kitsap Golf & Country Club

Nature of Debt (Purpose):

Event catering

Mailing Address 3885 NW Golf Club Hill Rd

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

4619.40

Transaction ID : D-87

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

3619.40

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Event fee

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

130.52

Transaction ID : D-349

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.52

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

3814.90

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 22 OF 23

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fox for WA

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Event fee

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

85.00

Transaction ID : D-351

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

85.00

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Meal

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

13.38

Transaction ID : D-361

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13.38

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Meeting meals

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

30.14

Transaction ID : D-363

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30.14

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

128.52

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

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

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

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 23 OF 23

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Fox for WA

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

Fox, Teresa, , ,

Nature of Debt (Purpose):

Event fee

Mailing Address 1735 Shorewood Dr

City

Bremerton

State

WA

Zip Code

98312

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-379

Amount Incurred This Period

75.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

75.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

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)

75.00

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

4828.78

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

7515.00

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

12343.78