

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

Lisa McClain for Congress

ADDRESS (number and street)

PO Box 327



Check if different
than previously
reported. (ACC)

Romeo

MI

48065

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00726042

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

STATE ▼ DISTRICT

MI

10

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
11 / 05 / 2024

in the
State of

MI

(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
10 / 01 / 2024

through

M M / D D / Y Y Y Y
10 / 16 / 2024

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

Kilgore, Paul, , ,

Signature of Treasurer

Kilgore, Paul, , ,

Date

M M / D D / Y Y Y Y
10 / 23 / 2024

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

Lisa McClain for Congress

Report Covering the Period: From: 10 / 01 / 2024 To: 10 / 16 / 2024

	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))	64814.36	1654580.45
(b) Total Contribution Refunds (from Line 20(d))	0.00	18175.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	64814.36	1636405.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	32453.69	696835.54
(b) Total Offsets to Operating Expenditures (from Line 14)	36.00	9125.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	32417.69	687709.92
8. Cash on Hand at Close of Reporting Period (from Line 27)	507963.20	
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)	550000.00	

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

Lisa McClain for Congress

Report Covering the Period: From: MM / DD / YYYY 10 / 01 / 2024 To: MM / DD / YYYY 10 / 16 / 2024

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).....	13674.00	696422.25
(ii) Unitemized	26140.36	36114.93
(iii) TOTAL of contributions from individuals	39814.36	732537.18
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	25000.00	922043.27
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	64814.36	1654580.45
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	8142.87	24108.08
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	36.00	9125.62
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	300.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	72993.23	1688114.15

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.....	32453.69	696835.54
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	13200.01
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	900000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	900000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	16575.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	18175.00
21. OTHER DISBURSEMENTS	0.00	474650.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	32453.69	2102860.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	467423.66
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	72993.23
25. SUBTOTAL (add Line 23 and Line 24).....	540416.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32453.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	507963.20

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	

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)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

GLANTZ, MARY, , MS.,

A.

Mailing Address 303 GRAY WOODS LANE

City

LAKE ANGELUS

State

MI

Zip Code

48326-1240

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	4

Transaction ID : SA11A.11915

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

RONCELLI, SHARON, , MRS.,

Mailing Address 69900 HICKS ROAD

City

ARMADA

State

MI

Zip Code

48005-4252

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

HOMEMAKER

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	4

Transaction ID : SA11A.12813

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

263670.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	4

Transaction ID : SA11C.11666

Amount of Each Receipt this Period

541.00

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

2000.00

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)

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

HATZIS, LUCAS, , ,

A.

Mailing Address 700 13TH ST NW

City

WASHINGTON

State

DC

Zip Code

20005-3960

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITOL COUNSELOccupation
CONSULTANT

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	4

Transaction ID : SA11A.11668

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

263670.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	2	4

Transaction ID : SA11C.11675

Amount of Each Receipt this Period

2030.00

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

C.

Full Name (Last, First, Middle Initial)

STENCEL, CHARLES, , ,

Mailing Address PO BOX 59

City

SARANAC LAKE

State

NY

Zip Code

12983-0059

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	4

Transaction ID : SA11A.11676

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

2500.00

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

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

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)
WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

263670.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		14		2024

Transaction ID : SA11C.11679

Amount of Each Receipt this Period

7621.54

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLDFull Name (Last, First, Middle Initial)
CASTIGLIA, ERIC, , ,

Mailing Address 38602 ROUGEWOOD DR

City
STERLING HEIGHTSState
MIZip Code
48312-1308FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
CGO

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

480.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		07		2024

Transaction ID : SA11A.11681

Amount of Each Receipt this Period

10.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)
KOHLER, STEPHEN, , ,

Mailing Address P.O. BOX 573

City
BROWN CITYState
MIZip Code
48416-0573FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
PROPANE MARKETER

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		09		2024

Transaction ID : SA11A.11692

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

510.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

KOSKELA, JAMES, , ,

A.

Mailing Address 207 N. SAGINAW

City
HOLLYState
MIZip Code
48442-1472FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
MARKETING

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 09 2024

Transaction ID : SA11A.11891

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

M, KAREN, , ,

B.

Mailing Address PO BOX 770

City
BOUNTIFULState
UTZip Code
84011-0770FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

531.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 09 2024

Transaction ID : SA11A.11800

Amount of Each Receipt this Period

531.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MILLS, ORION, , ,

C.

Mailing Address 22 TRENT DRIVE

City
STState
MOZip Code
63124-1033FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 09 2024

Transaction ID : SA11A.11811

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

1281.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

SOUDER, ASHLEY, , ,

A.

Mailing Address 18 WINDWOOD DR

City

JACKSON

State

TN

Zip Code

38305-8835

FEC ID number of contributing
federal political committee.

C

Name of Employer

GI OME

Occupation

R.N.

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	2	4

Transaction ID : SA11A.11689

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

WOODARD, DONALD, , ,

Mailing Address 626 SADDLEWOOD LANE

City

HOUSTON

State

TX

Zip Code

77024-5404

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	2	4

Transaction ID : SA11A.11881

Amount of Each Receipt this Period

5.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

WOODARD, DONALD, , ,

Mailing Address 626 SADDLEWOOD LANE

City

HOUSTON

State

TX

Zip Code

77024-5404

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

305.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	2	4

Transaction ID : SA11A.11882

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

355.00

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

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

WOODARD, DONALD, , ,

A.

Mailing Address 626 SADDLEWOOD LANE

City

HOUSTON

State

TX

Zip Code

77024-5404

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

305.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		09		2024

Transaction ID : SA11A.11883

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

WOODARD, DONALD, , ,

Mailing Address 626 SADDLEWOOD LANE

City

HOUSTON

State

TX

Zip Code

77024-5404

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

305.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		09		2024

Transaction ID : SA11A.11884

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

263670.50

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		16		2024

Transaction ID : SA11C.11916

Amount of Each Receipt this Period

26699.51

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

200.00

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

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

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

ANDERSON, BEVERLY, , ,

A. Mailing Address 290 NE HIGHWAY 41

City
WILLISTONState
FLZip Code
32696-7231FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 14 2024

Transaction ID : SA11A.12770

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BOND, BILL, , ,

B. Mailing Address 5 FELLVIEW DR

City
PITTSFORDState
NYZip Code
14534-4013FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 14 2024

Transaction ID : SA11A.12775

Amount of Each Receipt this Period

347.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

CLAIR, ANTOINETTE, , ,

C. Mailing Address 1038 ESTUDILLO ST

City
MARTINEZState
CAZip Code
94553-1622FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 16 2024

Transaction ID : SA11A.12432

Amount of Each Receipt this Period

31.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

628.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

CLAIR, ANTOINETTE, , ,

A.

Mailing Address 1038 ESTUDILLO ST

City

MARTINEZ

State

CA

Zip Code

94553-1622

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2024			

Transaction ID : SA11A.12761

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

CLAIR, ANTOINETTE, , ,

Mailing Address 1038 ESTUDILLO ST

City

MARTINEZ

State

CA

Zip Code

94553-1622

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2024			

Transaction ID : SA11A.12762

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

COLEMAN, MEL, , ,

Mailing Address 620 SAN MARCOS TRAIL

City

NEW BRAUNFELS

State

TX

Zip Code

78132-1656

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2024			

Transaction ID : SA11A.12771

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

450.00

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

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

ELLIOTT, DAVID, , ,

A.

Mailing Address 6621 TALMADGE LN.

City

DALLAS

State

TX

Zip Code

75230-2310

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2024			

Transaction ID : SA11A.12776

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

HENDRIX, RALPH, , ,

Mailing Address 101 BLANCA ISLES LN

City

JUPITER

State

FL

Zip Code

33478-5475

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			10			2024			

Transaction ID : SA11A.12772

Amount of Each Receipt this Period

250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

KEYES, JUDY, , ,

Mailing Address 1887 HIGH MEADOWS BOULEVARD

City

OAKLAND

State

MI

Zip Code

48363-2528

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

405.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2024			

Transaction ID : SA11A.12582

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

1300.00

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

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

OLSON, BEVERLY, K., ,

A. Mailing Address 200 IDLE HOUR DR

City
MACONState
GAZip Code
31210-4702

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	4

Transaction ID : SA11A.12056

FEC ID number of contributing
federal political committee.

C

Amount of Each Receipt this Period

300.00

Name of Employer
1842 INNOccupation
BED AND BREAKFAST

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

RADY, PAUL, , ,

B. Mailing Address 4 MOCKINGBIRD LANE

City
ENGLEWOODState
COZip Code
80113-4813

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

Transaction ID : SA11A.12063

FEC ID number of contributing
federal political committee.

C

Amount of Each Receipt this Period

1000.00

Name of Employer
ANTEROOccupation
MANAGER

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

REINHART, JOHN, , ,

C. Mailing Address 555 S OLD WOODWARD AVE SUITE 705

City
BIRMINGHAMState
MIZip Code
48009-6618

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	4

Transaction ID : SA11A.12773

FEC ID number of contributing
federal political committee.

C

Amount of Each Receipt this Period

250.00

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

1550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

RICHARDSON, DON, , ,

A. Mailing Address 3473 DUNROVIN WAYCity
CROZETState
VAZip Code
22932-2109FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2024			

Transaction ID : SA11A.12668

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

B. Full Name (Last, First, Middle Initial)
RICHARDSON, DON, , ,
Mailing Address 3473 DUNROVIN WAYCity
CROZETState
VAZip Code
22932-2109FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2024			

Transaction ID : SA11A.12774

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. Full Name (Last, First, Middle Initial)
RUDDER, FRANCHOT, , MR.,
Mailing Address 5708 KNOB HILL CIRCLECity
CLARKSTONState
MIZip Code
48348-4861FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2024			

Transaction ID : SA11A.12766

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

400.00

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

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

SCHWARTZ, TODD, , ,

A.

Mailing Address 1 N WACKER DRIVE

City

CHICAGO

State

IL

Zip Code

60606-2807

FEC ID number of contributing
federal political committee.

C

Name of Employer
OPPORTUNITY FINANCIAL LLCOccupation
CEO

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2024			

Transaction ID : SA11A.12695

Amount of Each Receipt this Period

2500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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
☐ Other (specify) ▼☐ General

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
☐ Other (specify) ▼☐ General

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)..... ▶

2500.00

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

13674.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

GUTHRIE FOR CONGRESS

A.

Mailing Address PO BOX 22401

City

LOUISVILLE

State

KY

Zip Code

40252-0401

FEC ID number of contributing
federal political committee.

C C00445023

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		01		2024

Transaction ID : SA11C.11674

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

REFUND ISSUED 10/23/2024

B.

Full Name (Last, First, Middle Initial)

BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION

Mailing Address 1201 15TH STREET NW

City

WASHINGTON

State

DC

Zip Code

20005-2842

FEC ID number of contributing
federal political committee.

C C00000901

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		14		2024

Transaction ID : SA11C.11670

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

CAREER EDUCATION CORPORATION PAC (CEC PAC)

Mailing Address P.O. BOX 7427

City

ALEXANDRIA

State

VA

Zip Code

22307-0427

FEC ID number of contributing
federal political committee.

C C00461574

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		16		2024

Transaction ID : SA11C.11913

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

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

6500.00

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

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)
FINSECA PAC

A.

Mailing Address 600 13TH ST NW
SUITE 550City
WASHINGTONState
DCZip Code
20005-3029FEC ID number of contributing
federal political committee.

C C00447565

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 16 2024

Transaction ID : SA11C.11911

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTIONFull Name (Last, First, Middle Initial)
INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL AC

B.

Mailing Address 1900 K STREET NW
SUITE 700City
WASHINGTONState
DCZip Code
20006-1135FEC ID number of contributing
federal political committee.

C C00084491

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 16 2024

Transaction ID : SA11C.11914

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTIONFull Name (Last, First, Middle Initial)
KOCH INDUSTRIES, INC. POLITICAL ACTION COMMITTEE (KOCHPAC)

C.

Mailing Address 4111 EAST 37TH STREET NORTH

City
WICHITAState
KSZip Code
67220-3203FEC ID number of contributing
federal political committee.

C C00236489

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 15 2024

Transaction ID : SA11C.11671

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

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

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

7000.00

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

KPMG PARTNERS/PRINCIPALS AND EMPLOYEES POLITICAL ACTION COMMITTEE

A.

Mailing Address 1801 K STREET, NW

City

WASHINGTON

State

DC

Zip Code

20006-1301

FEC ID number of contributing
federal political committee.

C C00280222

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 15 2024

Transaction ID : SA11C.11673

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MICHIGAN MILK PRODUCERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 41310 BRIDGE ST

P.O. BOX 8002

City

NOVI

State

MI

Zip Code

48375-1302

FEC ID number of contributing
federal political committee.

C C00096594

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 16 2024

Transaction ID : SA11C.11912

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1201 PENNSYLVANIA AVE. NW

12TH FLOOR

City

WASHINGTON

State

DC

Zip Code

20004-2401

FEC ID number of contributing
federal political committee.

C C00113811

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 16 2024

Transaction ID : SA11C.12814

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

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

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

6500.00

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

UNITED WHOLESALE MORTGAGE PAC (UWM PAC)

A.

Mailing Address 585 SOUTH BLVD

City
PONTIACState
MIZip Code
48341-3163FEC ID number of contributing
federal political committee.

C C00779538

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 15 2024

Transaction ID : SA11C.11672

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

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

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

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

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

5000.00

25000.00

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

LISA MCCLAIN LEADERSHIP FUND

A. Mailing Address 824 S MILLEDGE AVENUE

City
ATHENSState
GAZip Code
30605-1366FEC ID number of contributing
federal political committee.

C C00868091

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

20556.14

Date of Receipt

M M / D D / Y Y Y Y Y
10 16 2024

Transaction ID : SA12.12821

Amount of Each Receipt this Period

6097.71

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. Full Name (Last, First, Middle Initial)
FISHER, KENNETH, , MR.,

Mailing Address 1900 PRESTON ROAD

City
PLANOState
TXZip Code
75093-5175FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FISHER INVESTMENTS

BUSINESS EXECUTIVE

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 19 2024

Transaction ID : SA12.12824

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: LISA MCCLAIN LEADERSHIP FUND

C. Full Name (Last, First, Middle Initial)
FISHER, SHERRILYN, , MRS.,

Mailing Address 1900 PRESTON ROAD

City
PLANOState
TXZip Code
75093-5175FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

PLANO 6500 LLC

MEMBER

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 19 2024

Transaction ID : SA12.12825

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: LISA MCCLAIN LEADERSHIP FUND

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

6097.71

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	☐ 15

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

LARSEN, THOMAS, , MR.,

A.

Mailing Address 300 NEAL PLACE NE

City

WASHINGTON

State

DC

Zip Code

20002-8462

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

BUSINESS EXECUTIVE

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	4

Transaction ID : SA12.12822

Amount of Each Receipt this Period

825.00

☒ Memo Item

TRANSFER

JFC ATTRIB: LISA MCCLAIN LEADERSHIP FUND

B.

Full Name (Last, First, Middle Initial)

LARSEN, THOMAS, , MR.,

Mailing Address 300 NEAL PLACE NE

City

WASHINGTON

State

DC

Zip Code

20002-8462

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

BUSINESS EXECUTIVE

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	4

Transaction ID : SA12.12823

Amount of Each Receipt this Period

825.00

☒ Memo Item

TRANSFER

JFC ATTRIB: LISA MCCLAIN LEADERSHIP FUND

C.

Full Name (Last, First, Middle Initial)

BMW VICTORY COMMITTEE

Mailing Address PO BOX 30844

City

BETHESDA

State

MD

Zip Code

20824

FEC ID number of contributing
federal political committee.

C

C00832444

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2045.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	4

Transaction ID : SA12.2722

Amount of Each Receipt this Period

2045.16

☐ Memo Item

JFC EXPENSE REIMBURSEMENT

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

2045.16

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

8142.87

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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☐ 12	☐ 13a	☐ 13b	☒ 14	☐ 15

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

AMERICAN AIRLINES

A.

Mailing Address 1 SKYVIEW DRIVE

City

FORT WORTH

State

TX

Zip Code

76155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐

Primary

☐

General

Other (specify) ▼

Election Cycle-to-Date ▼

856.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2024			

Transaction ID : SA14.2669

Amount of Each Receipt this Period

36.00

☐

Memo Item

VENDOR REFUND

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)..... ▶

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

36.00

36.00

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

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. MARLOW, DONNA, , ,

Mailing Address 46479 BUTTE

City
MACOMBState
MIZip Code
48044Purpose of Disbursement
ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I2633

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARLOW, VICTORIA, , ,

Mailing Address 46478 BUTTE

City
MACOMBState
MIZip Code
48044Purpose of Disbursement
CONSTITUENT GIFTS-NO ITEMIZATION NECESSARY

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

111.27

Transaction ID : SB17.I2721

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AADVANTAGE AVIATOR RED MASTERCARD

Mailing Address P.O. BOX 60517

City
CITY OF INDUSTRYState
CAZip Code
91716Purpose of Disbursement
SEE MEMOS

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

4915.88

Transaction ID : SB17.I2734

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

6027.15

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

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. AMAZON

Mailing Address 440 TERRY AVENUE N

City
SEATTLEState
WAZip Code
98109Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

71.38

Transaction ID : SB17.I2735

☒ Memo Item**B. BP**

Mailing Address 3305 HIGHLAND RD

City
MILFORD CHARTERState
MIZip Code
48380Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

69.91

Transaction ID : SB17.I2737

☒ Memo Item**C. BUON APPETITTO**

Mailing Address 117 W LAFAYETTE ST

City
ROMEOState
MIZip Code
48065Purpose of Disbursement
CATERING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

251.70

Transaction ID : SB17.I2754

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

0.00

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

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

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. CABANA BLUE

Mailing Address 7317 DYKE RD

City
CLAY TOWNSHIPState
MIZip Code
48001Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

69.00

Transaction ID : SB17.I2766

☒ Memo Item**B. CHILLBOX**

Mailing Address 20 ROCHESTERROAD

City
LEONARDState
MIZip Code
48367Purpose of Disbursement
FUEL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

272.17

Transaction ID : SB17.I2738

☒ Memo Item**C. DELTA**

Mailing Address 1030 DELTA BOULEVARD

City
ATLANTAState
MIZip Code
30354Purpose of Disbursement
INTERNET

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17.I2739

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. EXXON MOBILE

Mailing Address 200 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

136.76

Transaction ID : SB17.I2765

☒ Memo Item**B. KROGER**

Mailing Address 64660 VAN DYKE

City
ROMEOState
MIZip Code
48065Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

74.08

Transaction ID : SB17.I2741

☒ Memo Item**C. MARATHON**

Mailing Address 6220 M 68 HWY

City
INDIAN RIVERState
MIZip Code
49749Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

76.24

Transaction ID : SB17.I2743

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. MCDONALD'S

Mailing Address 894 N. VAN DYKE

City
ALMONTState
MIZip Code
48003Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

32.03

Transaction ID : SB17.I2744

☒ Memo Item**B. MEIJER**

Mailing Address 36600 VANDYKE AVE

City
STERLING HEIGHTSState
MIZip Code
48312Purpose of Disbursement
CAMPAIGN EVENT EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

106.46

Transaction ID : SB17.I2745

☒ Memo Item**C. MICHAELS STORES**

Mailing Address 4824 S BALDWIN ROAD

City
ORION TWPState
MIZip Code
48359Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

61.44

Transaction ID : SB17.I2747

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. ROMEO QUICK LUBE

Mailing Address 66460 VAN DYKE AVENUE

City
WASHINGTONState
MIZip Code
48095Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

110.36

Transaction ID : SB17.I2748

☒ Memo Item**B. SAMS CLUB**

Mailing Address 45600 UTICA PARK BLVD

City
UTICAState
MIZip Code
48315Purpose of Disbursement
CATERING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1847.13

Transaction ID : SB17.I2749

☒ Memo Item**C. SHEENA'S MARKETPLACE**

Mailing Address 70920 S VAN DYKE RD

City
BRUCE TWPState
MIZip Code
48065Purpose of Disbursement
CATERING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

549.19

Transaction ID : SB17.I2750

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. SPEEDWAY

Mailing Address 57050 VAN DYKE AVE

City
WASHINGTONState
MIZip Code
48094Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

173.40

Transaction ID : SB17.I2751

☒ Memo Item**B. TARGET CORP**

Mailing Address 1000 NICOLLET MALL

City
MINNEAPOLISState
MNZip Code
55403Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

261.38

Transaction ID : SB17.I2752

☒ Memo Item**C. THE HOME DEPOT**

Mailing Address 8760 26 MILE RD

City
SHELBY TOWNSHIPState
MIZip Code
48316Purpose of Disbursement
HARDWARE SUPPLIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

15.52

Transaction ID : SB17.I2740

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

0.00

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. TIM HORTONS

Mailing Address 1490 S LINDEN ROAD

City
FLINTState
MIZip Code
48532Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

5.70

Transaction ID : SB17.I2753

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 42383 GARFIELD ROAD

City
CLINTON TWPState
MIZip Code
48038Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

9.85

Transaction ID : SB17.I2755

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. VINCE & JOES SHELBY

Mailing Address 55178 VAN DYKE AVE

City
SHELBY TOWNSHIPState
MIZip Code
48316Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

184.96

Transaction ID : SB17.I2756

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

0.00

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

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

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. ABRUZZO ITALIAN

Mailing Address 115 CENTRAL AVE

City
WHITEFISHState
MTZip Code
59937Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

344.85

Transaction ID : SB17.I2696

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMAZON

Mailing Address 440 TERRY AVENUE N

City
SEATTLEState
WAZip Code
98109Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

42.80

Transaction ID : SB17.I2681

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AVIS-RENT-A-CAR

Mailing Address 600 TERMINAL DR

City
FORT LAUDERDALEState
FLZip Code
33315Purpose of Disbursement
TRAVEL EXPENSE-CAR RENTAL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1152.19

Transaction ID : SB17.I2719

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

1539.84

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. CANVA

Mailing Address 75 EAST SANTA CLARA STREET

City
SAN JOSEState
CAZip Code
95113Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

12.99

Transaction ID : SB17.I2769

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CLASSIC CITY

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I2656

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CLASSIC CITY

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I2725

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

52.99

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)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. CMDIMailing Address 1593 SPRING HILL ROAD
STE 400City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
SOFTWARE DATABASE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

1200.00

Transaction ID : SB17.I2726

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. COSTCO WHOLESALE

Mailing Address 45460 MARKET ST

City
SHELBY TWPState
MIZip Code
48315Purpose of Disbursement
CATERING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		09		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

1196.34

Transaction ID : SB17.I2718

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA

Mailing Address 1030 DELTA BOULEVARD

City
ATLANTAState
MIZip Code
30354Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

723.80

Transaction ID : SB17.I2675

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

3120.14

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:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. DELTA

Mailing Address 1030 DELTA BOULEVARD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2024

City
ATLANTAState
MIZip Code
30354

FEC Identification Number

C

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

416.00

Transaction ID : SB17.I2684

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. DELTA

Mailing Address 1030 DELTA BOULEVARD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2024

City
ATLANTAState
MIZip Code
30354

FEC Identification Number

C

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

268.95

Transaction ID : SB17.I2695

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. DELTA

Mailing Address 1030 DELTA BOULEVARD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2024

City
ATLANTAState
MIZip Code
30354

FEC Identification Number

C

Purpose of Disbursement
AIRFARE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

706.94

Transaction ID : SB17.I2767

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

1391.89

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. DEMOCRACY ENGINEMailing Address 416 FLORIDA AVE. NW
#26418City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2.50

Transaction ID : SB17.I2733

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ESJ RESORT LLC

Mailing Address 848 BRICKELL AVE STE 900

City
MIAMIState
FLZip Code
33131Purpose of Disbursement
EVENT FACILITY RENTAL

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.I2670

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EXXON MOBILE

Mailing Address 200 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

13.07

Transaction ID : SB17.I2706

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

10015.57

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)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. EXXON MOBILE

Mailing Address 200 MASSACHUSETTS AVE NW

City
WASHINGTONState
DCZip Code
20002Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

37.62

Transaction ID : SB17.I2717

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 NORTH HAYDEN ROAD

City
SCOTTSDALEState
AZZip Code
85054Purpose of Disbursement
WEB SERVICES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

105.67

Transaction ID : SB17.I2772

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HOUSE GIFT SHOP

Mailing Address LONGWORTH BUILDING

City
WASHINGTONState
DCZip Code
20515Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

169.20

Transaction ID : SB17.I2662

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

312.49

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. HYATT GRAND PLACE

Mailing Address 140 OTTAWA AVE NW

City
GRAND RAPIDSState
MIZip Code
49503Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

114.08

Transaction ID : SB17.I2686

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HYATT GRAND PLACE

Mailing Address 140 OTTAWA AVE NW

City
GRAND RAPIDSState
MIZip Code
49503Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

200.42

Transaction ID : SB17.I2694

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. J W MARRIOTT

Mailing Address 235 LOUIS ST NW

City
GRAND RAPIDSState
MIZip Code
49503Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1156.85

Transaction ID : SB17.I2674

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

1471.35

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:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. J W MARRIOTT

Mailing Address 235 LOUIS ST NW

City
GRAND RAPIDSState
MIZip Code
49503Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2554.47

Transaction ID : SB17.I2697

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LYFT

Mailing Address 185 BERRY STREET #5000

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

48.94

Transaction ID : SB17.I2663

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LYFT

Mailing Address 185 BERRY STREET #5000

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

219.19

Transaction ID : SB17.I2668

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

2822.60

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

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. LYFT

Mailing Address 185 BERRY STREET #5000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2024

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

549.30

Transaction ID : SB17.I2671

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LYFT

Mailing Address 185 BERRY STREET #5000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		04		2024

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

273.73

Transaction ID : SB17.I2673

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LYFT

Mailing Address 185 BERRY STREET #5000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2024

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

28.01

Transaction ID : SB17.I2677

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

851.04

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

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

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. LYFT

Mailing Address 185 BERRY STREET #5000

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

2.00

Transaction ID : SB17.I2683

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LYFT

Mailing Address 185 BERRY STREET #5000

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		11		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

163.29

Transaction ID : SB17.I2768

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LYFT

Mailing Address 185 BERRY STREET #5000

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2024

FEC Identification Number

C

Amount of Each Disbursement this Period

69.67

Transaction ID : SB17.I2771

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

234.96

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)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. MICROSOFT

Mailing Address ONE MICROSOFT WAY

City
REDMONDState
WAZip Code
98052Purpose of Disbursement
WEBSITE SUBSCRIPTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

13.25

Transaction ID : SB17.I2680

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. QUALITY ITALIAN

Mailing Address 57 W 57TH ST

City
NEW YORKState
NYZip Code
10019Purpose of Disbursement
CATERING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

462.67

Transaction ID : SB17.I2666

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RESIDENCE INN

Mailing Address 20241011-EMB

City
BOZEMANState
MTZip Code
59715Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

409.16

Transaction ID : SB17.I2727

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

885.08

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. STARBUCKS COFFEE

Mailing Address 944 S. YORK ST

City
NEW YORKState
NYZip Code
60126Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

19.69

Transaction ID : SB17.I2665

☐ Memo Item**B. STARBUCKS COFFEE**

Mailing Address 944 S. YORK ST

City
NEW YORKState
NYZip Code
60126Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

12.21

Transaction ID : SB17.I2692

☐ Memo Item**C. STARBUCKS COFFEE**

Mailing Address 944 S. YORK ST

City
NEW YORKState
NYZip Code
60126Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

31.29

Transaction ID : SB17.I2704

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

63.19

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)

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

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. STARBUCKS COFFEE

Mailing Address 944 S. YORK ST

City
NEW YORKState
NYZip Code
60126Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

16.05

Transaction ID : SB17.I2716

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES, INCMailing Address 1455 MARKET STREET
SUITE 400 4TH FLOORCity
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

97.30

Transaction ID : SB17.I2664

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES, INCMailing Address 1455 MARKET STREET
SUITE 400 4TH FLOORCity
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

86.43

Transaction ID : SB17.I2667

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

199.78

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)

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

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES, INCMailing Address 1455 MARKET STREET
SUITE 400 4TH FLOORCity
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

51.87

Transaction ID : SB17.I2672

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES, INCMailing Address 1455 MARKET STREET
SUITE 400 4TH FLOORCity
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

51.93

Transaction ID : SB17.I2682

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UPS STORE

Mailing Address 8679 26 MILE RD

City
WASHINGTONState
MIZip Code
48904Purpose of Disbursement
SHIPPING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

51.33

Transaction ID : SB17.I2770

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

155.13

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)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. VIMEO INCMailing Address 330 WEST 34TH ST
10TH FLOORCity
NEW YORKState
NYZip Code
10001Purpose of Disbursement
WEB HOSTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

240.00

Transaction ID : SB17.I2679

☐ Memo Item**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

21.32

Transaction ID : SB17.I2661

☐ Memo Item**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

79.98

Transaction ID : SB17.I2723

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

341.30

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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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Lisa McClain for Congress

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

300.40

Transaction ID : SB17.I2724

☐ Memo Item**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1055.59

Transaction ID : SB17.I2730

☐ Memo Item**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

34.42

Transaction ID : SB17.I2776

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

1390.41

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

30874.91

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

PAGE 48 OF 48

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC10.1002

Lisa McClain for Congress

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

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

McClain, Lisa, , ,

Mailing Address

11540 34 Mile Road

City

Bruce Township

State

MI

ZIP Code

48065

☒ Personal Funds of the Candidate

Original Amount of Loan

1450000.00

Cumulative Payment To Date

900000.00

Balance Outstanding at Close of This Period

550000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 31 / 2022

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

On Demand

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).....▶

550000.00

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

550000.00

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