

# 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

Gary Palmer for Congress

ADDRESS (number and street)

1919 Oxmoor Rd

#235

Check if different than previously reported. (ACC)

Homewood

AL

35209

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00551374

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

AL

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

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2024

through

M M /

D D /

Y Y Y Y 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 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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Gary Palmer for Congress

Report Covering the Period: From:  /  /  To:  /  /

	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)) ....	<input type="text" value="99344.38"/>	<input type="text" value="1570931.99"/>
(b) Total Contribution Refunds (from Line 20(d)) .....	<input type="text" value="0.00"/>	<input type="text" value="14710.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	<input type="text" value="99344.38"/>	<input type="text" value="1556221.99"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	<input type="text" value="109061.96"/>	<input type="text" value="1815127.66"/>
(b) Total Offsets to Operating Expenditures (from Line 14) .....	<input type="text" value="2894.25"/>	<input type="text" value="4118.55"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	<input type="text" value="106167.71"/>	<input type="text" value="1811009.11"/>
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	<input type="text" value="220082.09"/>	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Gary Palmer for Congress

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2024 To: MM / DD / YYYY 09 / 30 / 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).....	34500.00	1018805.00
(ii) Unitemized.....	344.38	3616.99
(iii) TOTAL of contributions from individuals ▶	34844.38	1022421.99
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	64500.00	548510.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	99344.38	1570931.99
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	13068.91	78036.60
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.) .....	2894.25	4118.55
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)..... ▶	115307.54	1653087.14

**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.....	109061.96	1815127.66
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	14710.00
(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	14710.00
21. OTHER DISBURSEMENTS .....	8587.13	104987.13
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	117649.09	1934824.79

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	222423.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	115307.54
25. SUBTOTAL (add Line 23 and Line 24).....	337731.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	117649.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	220082.09

# 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 60	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 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)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
ARNOLD, W, DOUGLAS, ,

Mailing Address 111 WINDSWEPT

City ALEXANDER CITY	State AL	Zip Code 35010-8789
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

**Transaction ID : SA11A.20388**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
BULLARD, JOEL, B., , JR.

Mailing Address P.O. BOX 1497

City POINT CLEAR	State AL	Zip Code 36564-1497
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer JJT PROPERTIES, LLC	Occupation PARTNER
---	-----------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4800.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2024

**Transaction ID : SA11A.19970**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION  
SEE REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
BULLARD, FONCIE, , ,

Mailing Address P.O. BOX 1497

City POINT CLEAR	State AL	Zip Code 36564-1497
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation ENTREPRENEUR
-----------------------------------	----------------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2024

**Transaction ID : SA11A.20334**

Amount of Each Receipt this Period  
1700.00

Memo Item  
CONTRIBUTION  
REATTRIBUTION FROM SPOUSE

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3500.00
<b>TOTAL</b> 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 60	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
BULLARD, JOEL, B., , JR.

Mailing Address P.O. BOX 1497

City POINT CLEAR	State AL	Zip Code 36564-1497
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FEC ID number of contributing federal political committee.

Name of Employer JIT PROPERTIES, LLC	Occupation PARTNER
---	-----------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11A.20335**

Amount of Each Receipt this Period

Memo Item  
 CONTRIBUTION  
 REATTRIBUTION TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
CARMICHAEL, DONALD, , ,

Mailing Address 2857 CANTERBURY RD

City MOUNTAIN BRK	State AL	Zip Code 35223-1201
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FEC ID number of contributing federal political committee.

Name of Employer SELF EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11A.19972**

Amount of Each Receipt this Period

Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
CROSS, J., R., , JR.

Mailing Address P.O. BOX 6267

City MOBILE	State AL	Zip Code 36660-0267
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FEC ID number of contributing federal political committee.

Name of Employer GULF COAST TRUCK AND EQUIPMENT	Occupation PRESIDENT
--	-------------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
 /  /

**Transaction ID : SA11A.19971**

Amount of Each Receipt this Period

Memo Item  
 CONTRIBUTION  
 SEE REATTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="6000.00"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value=""/>

# 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 60
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
CROSS, J., R., , JR.

Mailing Address P.O. BOX 6267

City MOBILE	State AL	Zip Code 36660-0267
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GULF COAST TRUCK AND EQUIPMENT	Occupation PRESIDENT
--	-------------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2024

**Transaction ID : SA11A.20375**

Amount of Each Receipt this Period  
- 1700.00

Memo Item  
CONTRIBUTION  
REATTRIBUTION TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
CROSS, TAMMY, , ,

Mailing Address P.O. BOX 6267

City MOBILE	State AL	Zip Code 36660-0267
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FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 15 / 2024

**Transaction ID : SA11A.20374**

Amount of Each Receipt this Period  
1700.00

Memo Item  
CONTRIBUTION  
REATTRIBUTION FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
DAVIS, HARTWELL, , , JR.

Mailing Address 4109 KENNESAW DR.

City MOUNTAIN BRK	State AL	Zip Code 35213-3225
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FEC ID number of contributing federal political committee. **C**

Name of Employer METALPLATE GALVANIZING	Occupation OWNER
--	---------------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2024

**Transaction ID : SA11A.20030**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

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

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

2000.00

# 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 8 OF 60	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
GLISSON, ELIZABETH, S., ,

Mailing Address 1516 WOODRIDGE PL

City VESTAVIA HILLS	State AL	Zip Code 35216-1656
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF
---	--

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 22 / 2024

**Transaction ID : SA11A.20210**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JUSTICE, SUSAN, H., ,

Mailing Address 814 EUCLID AVE

City MOUNTAIN BRK	State AL	Zip Code 35213-2502
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF
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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 Y  
09 / 30 / 2024

**Transaction ID : SA11A.20376**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
KEANE, KATHRYN, , ,

Mailing Address 1584 WOODRIDGE PLACE

City VESTAVIA HILLS	State AL	Zip Code 35216-1658
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF
---	--

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 Y  
08 / 22 / 2024

**Transaction ID : SA11A.20214**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

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

1500.00



# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
KENNEDY, NEIL, M., ,

Mailing Address 358 RIDGELAWN DR. W

City MOBILE State AL Zip Code 36608-6109

FEC ID number of contributing federal political committee. **C**

Name of Employer STIFEL, NICOLAUS & CO Occupation SENIOR VP

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 31 2024

Transaction ID : SA11A.20032

Amount of Each Receipt this Period  
3050.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
KING, GEORGE, , ,

Mailing Address 111 OLYMPUS WAY

City JUPITER State FL Zip Code 33477-7335

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 22 2024

Transaction ID : SA11A.19974

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
KING, PAMELA, , ,

Mailing Address 1773 COLLINWOOD COURT

City BIRMINGHAM State AL Zip Code 35243-3505

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

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 Y  
08 22 2024

Transaction ID : SA11A.20215

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4050.00

**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: PAGE 10 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
LANG, ALLEN, , ,

Mailing Address 839 BISHOPS COURT

City BIRMINGHAM State AL Zip Code 35242-7018

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 22 / 2024

Transaction ID : SA11A.20216

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
LIVANIOS, ANTHONY, , ,

Mailing Address 8307 SUMMER REEF DRIVE

City HOUSTON State TX Zip Code 77095-4354

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

Transaction ID : SA11A.20384

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
OSBORNE, BRAD, , ,

Mailing Address 2101 HICKORY RIDGE CIRCLE

City VESTAVIA State AL Zip Code 35243-2926

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 22 / 2024

Transaction ID : SA11A.20217

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

3000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
PETERS, PATRICIA, L., ,

Mailing Address 1178 CHEVAL LN

City VESTAVIA HILLS State AL Zip Code 35216-2004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

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 Y  
09 / 30 / 2024

Transaction ID : SA11A.20378

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
REIN, JAMES, O., ,

Mailing Address 1864 SHADES CREST RD

City VESTAVIA HILLS State AL Zip Code 35216-1412

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 22 / 2024

Transaction ID : SA11A.20208

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
REIN, JOAN, C., ,

Mailing Address 1864 SHADES CREST RD

City VESTAVIA HILLS State AL Zip Code 35216-1412

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

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 Y  
08 / 22 / 2024

Transaction ID : SA11A.20212

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5250.00

**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: PAGE 12 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
RUSSELL, KEITH, , ,

Mailing Address 479 SCENIC VIEW LANE

City BIRMINGHAM State AL Zip Code 35244-4011

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

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 Y  
09 / 30 / 2024

Transaction ID : SA11A.20377

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
SKINNER, RICK, , ,

Mailing Address 19111 SCENIC HIGHWAY 98

City FAIRHOPE State AL Zip Code 36532-6837

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 05 / 2024

Transaction ID : SA11A.20293

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
STEVENS, SHANE, , ,

Mailing Address 2001 WINDY TERRACE

City CEDAR PARK State TX Zip Code 78613-4289

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

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 Y  
09 / 30 / 2024

Transaction ID : SA11A.20385

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

**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: PAGE 13 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
TOWNS, THOMAS, RICHARD, ,

Mailing Address 344 VESCLUB DR.

City VESTAVIA State AL Zip Code 35216-1326

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

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 Y  
09 / 30 / 2024

Transaction ID : SA11A.20379

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
WILSON, MATT, , ,

Mailing Address 2367 RIDGE TRL

City BIRMINGHAM State AL Zip Code 35242-3759

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF EMPLOYED FINANCIAL ADVISOR

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 22 / 2024

Transaction ID : SA11A.20209

Amount of Each Receipt this Period  
350.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
WRIGHT, JACK, , ,

Mailing Address 3205 LORNA ROAD

City HOOVER State AL Zip Code 35216-7411

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

Transaction ID : SA11A.20382

Amount of Each Receipt this Period  
3100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3700.00

**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: PAGE 14 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO 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  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
160694.70

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 29 / 2024

**Transaction ID : SA11C.19978**

Amount of Each Receipt this Period  
517.93

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

**B.** Full Name (Last, First, Middle Initial)  
JAHRAUS, CHRISTOPHER, , ,

Mailing Address 70 BOWDEN CIRCLE

City CHELSEA State AL Zip Code 35043-3215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
GENERATIONS RADITHERAPY ONCOLOGY PHYSICIAN

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 23 / 2024

**Transaction ID : SA11A.19980**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

**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 Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	34500.00

# 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 15 OF 60	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**GUTHRIE FOR CONGRESS**

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  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

**Transaction ID : SA11C.20387**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LUCAS FOR CONGRESS**

Mailing Address PO BOX 1726

City OKLAHOMA CITY	State OK	Zip Code 73101-1726
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00287912

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  
09 / 30 / 2024

**Transaction ID : SA11C.20386**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**340B HEALTH POLITICAL ACTION COMMITTEE (340B HEALTH PAC)**

Mailing Address 1350 I STREET NW  
SUITE 800

City WASHINGTON	State DC	Zip Code 20005-3304
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00619601

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2024

**Transaction ID : SA11C.20332**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5500.00
<b>TOTAL</b> 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 16 OF 60	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGAT

Mailing Address 10275 W. HIGGINS RD  
SUITE 500 - C/O FINANCE DEPARTMENT

City ROSEMONT	State IL	Zip Code 60018-3887
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 29 / 2024

**Transaction ID : SA11C.19977**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF NURSE PRACTITIONERS POLITICAL ACTION

Mailing Address P.O. BOX 12846

City AUSTIN	State TX	Zip Code 78711-2846
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00358903

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

**Transaction ID : SA11C.20371**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON	State DC	Zip Code 20036-3971
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004275

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  
08 / 27 / 2024

**Transaction ID : SA11C.20219**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> 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 17 OF 60	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN CHEMISTRY COUNCIL PAC

Mailing Address 700 2ND STREET, NE

City WASHINGTON	State DC	Zip Code 20002-8100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00252338

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2024

**Transaction ID : SA11C.20331**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN CHEMISTRY COUNCIL PAC

Mailing Address 700 2ND STREET, NE

City WASHINGTON	State DC	Zip Code 20002-8100
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00252338

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

**Transaction ID : SA11C.20372**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN PETROLEUM INSTITUTE POLITICAL ACTION COMMITTEE (API)

Mailing Address 200 MASSACHUSETTS AVENUE, NW  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20001-5571
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00483677

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

**Transaction ID : SA11C.20373**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2500.00
<b>TOTAL</b> 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: PAGE 18 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN SUGAR CANE LEAGUE OF USA INC POLITICAL ACTION COMMI**

Mailing Address P.O. DRAWER 938

City THIBODAUX	State LA	Zip Code 70302-0938
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00081414

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 19 / 2024

**Transaction ID : SA11C.20167**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITT**

Mailing Address 440 FIRST STREET NW  
SUITE 200

City WASHINGTON	State DC	Zip Code 20001-2376
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 22 / 2024

**Transaction ID : SA11C.19973**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BEN CLINE FOR CONGRESS, INC.**

Mailing Address P.O. BOX 1790

City HARRISONBURG	State VA	Zip Code 22803-1790
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00661561

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

**Transaction ID : SA11C.20389**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> 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 19 OF 60	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BUILDING AMERICA'S REPUBLICAN REPRESENTATION PAC**

Mailing Address 824 S MILLEDGE AVE  
STE 101

City ATHENS	State GA	Zip Code 30605-1369
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00572271

Name of Employer	Occupation
------------------	------------

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 Y  
09 / 30 / 2024

**Transaction ID : SA11C.20383**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ELECT - THE PAC OF THE ALABAMA FARMERS FEDERATION**

Mailing Address P. O. BOX 11000

City MONTGOMERY	State AL	Zip Code 36191-0001
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00094573

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  
09 / 30 / 2024

**Transaction ID : SA11C.20368**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Mailing Address 600 14TH STREET, NW  
SUITE 800

City WASHINGTON	State DC	Zip Code 20005-2099
--------------------	-------------	------------------------

FEC 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  
09 / 30 / 2024

**Transaction ID : SA11C.20370**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	10000.00
<b>TOTAL</b> 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 20 OF 60	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL RULLI FOR OHIO STATE SENATE**

Mailing Address 41 SOUTH HIGH STREET  
STE 3625

City COLUMBUS	State OH	Zip Code 43215-6112
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00890582

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

**Transaction ID : SA11C.20381**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION COMMITTEE**

Mailing Address 2600 SOUTH EUCLID AVENUE

City BAY CITY	State MI	Zip Code 48706-3414
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00384354

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 19 / 2024

**Transaction ID : SA11C.20166**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Mailing Address 7525 RED RIVER ROAD

City WAHPETON	State ND	Zip Code 58075-9705
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00164939

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 19 / 2024

**Transaction ID : SA11C.20165**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> 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: PAGE 21 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MOR**

Mailing Address 1919 M STREET, NW  
5TH FLOOR

City WASHINGTON State DC Zip Code 20036-3572

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2024

**Transaction ID : SA11C.20366**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 4300 WILSON BLVD  
SUITE 400

City ARLINGTON State VA Zip Code 22203-4167

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer Occupation

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2024

**Transaction ID : SA11C.20329**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC.**

Mailing Address 1875 I STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

Name of Employer Occupation

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 Y  
09 / 30 / 2024

**Transaction ID : SA11C.20380**

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)..... ▶

5000.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMI

Mailing Address 1101 KING STREET  
SUITE 600

City ALEXANDRIA State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

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  
08 / 19 / 2024

Transaction ID : SA11C.20164

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL FEDERATION OF INDEPENDENT BUSINESS FEDERAL POLITICA

Mailing Address 1201 F STREET  
SUITE 200

City WASHINGTON State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 31 / 2024

Transaction ID : SA11C.20031

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMIT

Mailing Address 1850 M STREET, NW  
SUITE 540

City WASHINGTON State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 19 / 2024

Transaction ID : SA11C.20162

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

**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: PAGE 23 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMIT**

Mailing Address 1850 M STREET, NW  
SUITE 540

City WASHINGTON State DC Zip Code 20036-5816

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 30 / 2024

**Transaction ID : SA11C.20369**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX State VA Zip Code 22030-7550

FEC ID number of contributing federal political committee. **C** C00053553

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  
09 / 30 / 2024

**Transaction ID : SA11C.20367**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL SHOOTING SPORTS FOUNDATION, INC. POLITICAL ACTION C**

Mailing Address 400 N. CAPITOL STREET NW  
SUITE 475

City WASHINGTON State DC Zip Code 20001-1593

FEC ID number of contributing federal political committee. **C** C00480863

Name of Employer Occupation

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 05 / 2024

**Transaction ID : SA11C.20294**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4500.00

**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: PAGE 24 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PATRIOTS IN ACTION**

Mailing Address 1005 CONGRESS AVE STE 910

City AUSTIN	State TX	Zip Code 78701-2467
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00531590

Name of Employer	Occupation
------------------	------------

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 Y  
07 / 29 / 2024

**Transaction ID : SA11C.19976**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PHILLIPS 66 PAC**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
STE 1150N

City WASHINGTON	State DC	Zip Code 20004-3650
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00513549

Name of Employer	Occupation
------------------	------------

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 Y  
09 / 16 / 2024

**Transaction ID : SA11C.20330**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SUGAR CANE GROWERS COOPERATIVE OF FLORIDA (PAC)**

Mailing Address P.O. BOX 666

City BELLE GLADE	State FL	Zip Code 33430-0666
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00254656

Name of Employer	Occupation
------------------	------------

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 Y  
08 / 19 / 2024

**Transaction ID : SA11C.20163**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5500.00
<b>TOTAL</b> 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: PAGE 25 OF 60  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
TYSON FOODS INC POLITICAL ACTION COMMITTEE (TYPAC)

Mailing Address PO BOX 2020

City SPRINGDALE	State AR	Zip Code 72765-2020
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00169821

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 19 / 2024

**Transaction ID : SA11C.20168**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
UPPER HAND FUND

Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152-0485
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00503151

Name of Employer	Occupation
------------------	------------

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  
07 / 22 / 2024

**Transaction ID : SA11C.19975**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATIONS, INC. POLITICAL ACTION COMMITTEE (VER)

Mailing Address 1300 I ST NW, STE 500 EAST  
ATTN: TAYLOR CRAIG

City WASHINGTON	State DC	Zip Code 20005-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer	Occupation
------------------	------------

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 01 / 2024

**Transaction ID : SA11C.19848**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	64500.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 OF 60  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**PALMER VICTORY COMMITTEE**

Mailing Address 1919 OXMOOR RD  
#223

City: HOMEWOOD State: AL Zip Code: 35209-3502

FEC ID number of contributing federal political committee: **C** C00624627

Name of Employer: Occupation:

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 78036.60

Date of Receipt: 08 / 29 / 2024

Transaction ID : SA12.20220

Amount of Each Receipt this Period: 13068.91

Memo Item  
TRANSFER  
TRANSFER OF NET JFC FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**PEEPLES, MARK, A., ,**

Mailing Address 2745 SMYER CIRCLE

City: VESTAVIA HILLS State: AL Zip Code: 35216-1024

FEC ID number of contributing federal political committee: **C**

Name of Employer: MAP DEVELOPMENT, LLC Occupation: OWNER

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 3300.00

Date of Receipt: 08 / 08 / 2024

Transaction ID : SA.20134.13.24Q3

Amount of Each Receipt this Period: 3300.00

Memo Item  
TRANSFER  
TRANSFER FROM PALMER VICTORY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**PILOT, DAVIS, , ,**

Mailing Address 128 SOUTH PINEBROOK DRIVE

City: MOBILE State: AL Zip Code: 36608-2317

FEC ID number of contributing federal political committee: **C**

Name of Employer: PILOT CATASTROPHE SERVICES Occupation: SENIOR VP

Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 3300.00

Date of Receipt: 06 / 28 / 2024

Transaction ID : SA.19868.13.24Q3

Amount of Each Receipt this Period: 3300.00

Memo Item  
TRANSFER  
TRANSFER FROM PALMER VICTORY COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	13068.91
<b>TOTAL</b> 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 27 OF 60
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
PILOT, DEBBIE, , ,

Mailing Address 128 SOUTH PINEBROOK DRIVE

City MOBILE      State AL      Zip Code 36608-2317

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE      Occupation HOMEMAKER

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2024

Transaction ID : SA.19869.13.24Q3

Amount of Each Receipt this Period  
3300.00

Memo Item  
TRANSFER  
TRANSFER FROM PALMER VICTORY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
PILOT, RODNEY, , ,

Mailing Address 18094 ALABAMA 181

City FAIRHOPE      State AL      Zip Code 36532-

FEC ID number of contributing federal political committee. **C**

Name of Employer PILOT CATASTROPHE SERVICE, INC      Occupation SENIOR VP

Receipt For: 2024  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 28 / 2024

Transaction ID : SA.19867.13.24Q3

Amount of Each Receipt this Period  
3300.00

Memo Item  
TRANSFER  
TRANSFER FROM PALMER VICTORY COMMITTEE

**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 Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13068.91

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 60  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A.** Full Name (Last, First, Middle Initial)  
SPECTRUM REACH

Mailing Address 2501 20TH PL S  
STE 200

City BIRMINGHAM State AL Zip Code 35223-1701

FEC ID number of contributing federal political committee.

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  
07 / 18 / 2024

Transaction ID : SA14.14757

Amount of Each Receipt this Period

Memo Item  
MEDIA BUY REFUND

**B.** Full Name (Last, First, Middle Initial)  
SUMMIT MEDIA

Mailing Address 800 SHADES CREEK PARKWAY  
SUITE 725

City BIRMINGHAM State AL Zip Code 35209

FEC ID number of contributing federal political committee.

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  
07 / 22 / 2024

Transaction ID : SA14.14761

Amount of Each Receipt this Period

Memo Item  
MEDIA BUY REFUND

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

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

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	<input type="text" value="2894.25"/>
<b>TOTAL</b> This Period (last page this line number only)..... ▶	<input type="text" value="2894.25"/>

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. BRYANT, JACKSON, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2024
Mailing Address 1480 ROCK SCHOOL ROAD		FEC Identification Number C
City HARPERVILLE	State AL	Zip Code 35078
Purpose of Disbursement FIELD SALARY		Amount of Each Disbursement this Period 2000.00
Candidate Name	Category/Type	Transaction ID : SB17.I14770
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BRYANT, JACKSON, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2024
Mailing Address 1480 ROCK SCHOOL ROAD		FEC Identification Number C
City HARPERVILLE	State AL	Zip Code 35078
Purpose of Disbursement FIELD SALARY		Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	Transaction ID : SB17.I14825
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PALMER, GARY, JAMES, ,</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2024
Mailing Address 1973 CAHABA CREST DR.		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35242-4414
Purpose of Disbursement REIMBURSEMENT- SEE MEMO		Amount of Each Disbursement this Period 1471.13
Candidate Name	Category/Type	Transaction ID : SB17.I14778
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4471.13
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. PALMER, GARY, JAMES, ,</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2024	
Mailing Address 1973 CAHABA CREST DR.			FEC Identification Number C	
City BIRMINGHAM	State AL	Zip Code 35242-4414	Amount of Each Disbursement this Period 797.37	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type	Transaction ID : SB17.I14780	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. MARKS OUTDOOR SPORTS INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2024	
Mailing Address 1400 MONTGOMERY HWY			FEC Identification Number C	
City VESTAVIA HILLS	State AL	Zip Code 35216-3659	Amount of Each Disbursement this Period 428.97	
Purpose of Disbursement EVENT GIFTS- BINOCULARS		Category/ Type	Transaction ID : SB17.I14782	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. VECTOR SECURITY, INC</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2024	
Mailing Address PO BOX 89462			FEC Identification Number C	
City CLEVELAND	State OH	Zip Code 89462	Amount of Each Disbursement this Period 105.34	
Purpose of Disbursement RESIDENTIAL SECURITY EXPENSE		Category/ Type	Transaction ID : SB17.I14783	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2024
Mailing Address 1095 AVENUE OF THE AMERICAS		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10036-6797
Purpose of Disbursement TELEPHONE	Amount of Each Disbursement this Period 130.45	
Candidate Name	Transaction ID : SB17.I14784	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PALMER, GARY, JAMES, ,</b>		Date of Disbursement MM / DD / YYYY 09 / 20 / 2024
Mailing Address 1973 CAHABA CREST DR.		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35242-4414
Purpose of Disbursement REIMBURSEMENT- SEE MEMO	Amount of Each Disbursement this Period 1536.03	
Candidate Name	Transaction ID : SB17.I14835	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PALMER, GARY, JAMES, ,</b>		Date of Disbursement MM / DD / YYYY 09 / 20 / 2024
Mailing Address 1973 CAHABA CREST DR.		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35242-4414
Purpose of Disbursement MILEAGE REIMBURSEMENT	Amount of Each Disbursement this Period 661.62	
Candidate Name	Transaction ID : SB17.I14844	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1536.03
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE UNIVERSITY OF ALABAMA</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2024
Mailing Address 500 UNIVERSITY BOULEVARD EAST		FEC Identification Number C
City TUSCALOOSA	State AL	Zip Code 35404
Purpose of Disbursement EVENT TICKETS	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 250.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14840
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. VECTOR SECURITY, INC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2024
Mailing Address PO BOX 89462		FEC Identification Number C
City CLEVELAND	State OH	Zip Code 89462
Purpose of Disbursement RESIDENTIAL SECURITY EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 56.09	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14837
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2024
Mailing Address 1095 AVENUE OF THE AMERICAS		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10036-6797
Purpose of Disbursement TELEPHONE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 55.89	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14836
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. WOODS &amp; WATER INC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2024	
Mailing Address 5101 SUMMIT RIDGE			FEC Identification Number C	
City TUSCALOOSA	State AL	Zip Code 35405	Amount of Each Disbursement this Period 315.24	
Purpose of Disbursement CAMPAIGN GEAR- SHIRTS		Category/ Type	Transaction ID : SB17.I14838	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SMITH, WILLIAM, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2024	
Mailing Address 9812 BURKE POND LN			FEC Identification Number C	
City BURKE	State VA	Zip Code 22015-2957	Amount of Each Disbursement this Period 6600.00	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type	Transaction ID : SB17.I14824	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. ALABAMA GOP</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2024	
Mailing Address 3505 LORNA RD			FEC Identification Number C	
City VESTAVIA HILLS	State AL	Zip Code 35216-5901	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement SPONSORSHIP		Category/ Type	Transaction ID : SB17.I14814	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. ALABAMA POLICY INSTITUE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2024
Mailing Address 402 OFFICE PARK DR STE 300		FEC Identification Number C
City MOUNTAIN BRK	State AL	Zip Code 35223-2434
Purpose of Disbursement EVENT SPONSORSHIP	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 5000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I14818	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2024
Mailing Address 4255 AMON CARTER BLVD		FEC Identification Number C
City FORTH WORTH	State TX	Zip Code 76155-2605
Purpose of Disbursement TRAVEL EXPENSE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 528.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I14773	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. AUTO OWNERS INSURANCE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2024
Mailing Address 120 E 5TH ST		FEC Identification Number C
City TUSCUMBIA	State AL	Zip Code 35674-2443
Purpose of Disbursement INSURANCE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 354.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I14727	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5883.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. BLUE STAR SALUTE FOUNDATION</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2024
Mailing Address PO BOX 203			FEC Identification Number C
City HARPERSVILLE	State AL	Zip Code 35078-0203	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement SPONSORSHIP		Category/Type	Transaction ID : SB17.I14828
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2024
Mailing Address 300 1ST ST SE			FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 522.33
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : SB17.I14750
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2024
Mailing Address 300 1ST ST SE			FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 594.39
Purpose of Disbursement MEETING EXPENSE		Category/Type	Transaction ID : SB17.I14776
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1616.72
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2024
Mailing Address 300 1ST ST SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003-1801
Purpose of Disbursement MEETING EXPENSE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 84.46	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14854
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2024
Mailing Address 1593 SPRING HILL RD #400		FEC Identification Number C
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1200.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14759
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2024
Mailing Address 1593 SPRING HILL RD #400		FEC Identification Number C
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1200.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14799
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2484.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2024
Mailing Address 1593 SPRING HILL RD #400		FEC Identification Number C
City VIENNA	State VA	Zip Code 22182
Purpose of Disbursement SOFTWARE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : SB17.I14851</b>
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. CONSTANT CONTACT</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2024
Mailing Address 1601 TRAPELO RD		FEC Identification Number C
City WALTHAM	State MA	Zip Code 02451-7333
Purpose of Disbursement MARKETING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 343.00 <b>Transaction ID : SB17.I14771</b>
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. CONSTANT CONTACT</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2024
Mailing Address 1601 TRAPELO RD		FEC Identification Number C
City WALTHAM	State MA	Zip Code 02451-7333
Purpose of Disbursement MARKETING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 343.00 <b>Transaction ID : SB17.I14816</b>
State: District:		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1886.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A. CONSTANT CONTACT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1601 TRAPELO RD

City WALTHAM State MA Zip Code 02451-7333

Purpose of Disbursement  
MARKETING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 27 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 371.00

Transaction ID : SB17.I14857

Memo Item

**B. DELTA**

Full Name (Last, First, Middle Initial)  
Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354-1989

Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 23 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 319.98

Transaction ID : SB17.I14848

Memo Item

**C. DEMOCRACY ENGINE**

Full Name (Last, First, Middle Initial)  
Mailing Address 2125 14TH ST NW

City WASHINGTON State DC Zip Code 20009-4464

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 11 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 0.31

Transaction ID : SB17.I14754

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 691.29

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. DEMOCRACY ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2024		
Mailing Address 2125 14TH ST NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20009-4464	Amount of Each Disbursement this Period 0.05		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : SB17.I14774		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. DEMOCRACY ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2024		
Mailing Address 2125 14TH ST NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20009-4464	Amount of Each Disbursement this Period 0.05		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : SB17.I14797		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. DEMOCRACY ENGINE</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2024		
Mailing Address 2125 14TH ST NW			FEC Identification Number C		
City WASHINGTON	State DC	Zip Code 20009-4464	Amount of Each Disbursement this Period 0.06		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : SB17.I14798		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.16
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. DEMOCRACY ENGINE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2024
Mailing Address 2125 14TH ST NW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20009-4464
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.05
Candidate Name		Transaction ID : SB17.I14823
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FEDEX</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2024
Mailing Address 942 SHADY GROVE RD S		FEC Identification Number C
City MEMPHIS	State TN	Zip Code 38120-4117
Purpose of Disbursement SHIPPING		Amount of Each Disbursement this Period 288.42
Candidate Name		Transaction ID : SB17.I14830
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FIESTA 2024</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2024
Mailing Address 1746 HELEN RIDGE DRIVE		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35242
Purpose of Disbursement EVENT SPONSORSHIP		Amount of Each Disbursement this Period 2500.00
Candidate Name		Transaction ID : SB17.I14826
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2788.47
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. FOCUS CREATIVE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2024
Mailing Address 3658 JAMES HILL TERRACE		FEC Identification Number C
City HOOVER	State AL	Zip Code 35226
Purpose of Disbursement PHOTOGRAPHY	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1750.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14747
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. FOCUS CREATIVE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2024
Mailing Address 3658 JAMES HILL TERRACE		FEC Identification Number C
City HOOVER	State AL	Zip Code 35226
Purpose of Disbursement PHOTOGRAPHY	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14767
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. FREEDOM VOICE</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2024
Mailing Address 169 SAXONY RD		FEC Identification Number C
City ENCINITAS	State CA	Zip Code 92024-6778
Purpose of Disbursement TELEPHONE	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 10.56	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14753
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4260.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. FREEDOM VOICE</b>		M M / D D / Y Y Y Y 08 / 12 / 2024	
Mailing Address 169 SAXONY RD		FEC Identification Number	
City ENCINITAS	State CA	C	
Zip Code 92024-6778	Purpose of Disbursement TELEPHONE	Amount of Each Disbursement this Period	
Candidate Name	Category/Type	10.56	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14777	
State: District:		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. FREEDOM VOICE</b>		M M / D D / Y Y Y Y 09 / 11 / 2024	
Mailing Address 169 SAXONY RD		FEC Identification Number	
City ENCINITAS	State CA	C	
Zip Code 92024-6778	Purpose of Disbursement TELEPHONE	Amount of Each Disbursement this Period	
Candidate Name	Category/Type	10.56	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14831	
State: District:		<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. GODADDY.COM</b>		M M / D D / Y Y Y Y 07 / 16 / 2024	
Mailing Address 14455 N HAYDEN RD ST 219		FEC Identification Number	
City SCOTTSDALE	State AZ	C	
Zip Code 85260-6993	Purpose of Disbursement SOFTWARE	Amount of Each Disbursement this Period	
Candidate Name	Category/Type	74.32	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14751	
State: District:		<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	95.44
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2024
Mailing Address 1600 AMPHITHEATRE PKWY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351
Purpose of Disbursement ADVERTISING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 105.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14728
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2024
Mailing Address 1600 AMPHITHEATRE PKWY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351
Purpose of Disbursement ADVERTISING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 105.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14769
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 09 / 03 / 2024
Mailing Address 1600 AMPHITHEATRE PKWY		FEC Identification Number C
City MOUNTAIN VIEW	State CA	Zip Code 94043-1351
Purpose of Disbursement ADVERTISING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 105.60	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14821
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	316.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. GVI 2014 LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 09 / 2024
Mailing Address 2 METROPLEX DR STE 215		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35209-6800
Purpose of Disbursement RENT	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 345.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I14752	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. GVI 2014 LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 06 / 2024
Mailing Address 2 METROPLEX DR STE 215		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35209-6800
Purpose of Disbursement RENT	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 345.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I14779	
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. GVI 2014 LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 05 / 2024
Mailing Address 2 METROPLEX DR STE 215		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35209-6800
Purpose of Disbursement RENT	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 345.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17.I14819	
		<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1035.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. HOOVER CHAMBER OF COMMERCE</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2024
Mailing Address 1694 MONTGOMERY HWY STE 108			FEC Identification Number C
City VESTAVIA HILLS	State AL	Zip Code 35216-4990	Amount of Each Disbursement this Period 175.00
Purpose of Disbursement MEMBERSHIP DUES		Category/ Type	Transaction ID : SB17.I14791
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. HOOVER PRINT COMPANY</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2024
Mailing Address 3413 SIERRA DR.			FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35216-5505	Amount of Each Disbursement this Period 185.00
Purpose of Disbursement PRINTING		Category/ Type	Transaction ID : SB17.I14800
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. HOOVER PRINT COMPANY</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2024
Mailing Address 3413 SIERRA DR.			FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35216-5505	Amount of Each Disbursement this Period 125.00
Purpose of Disbursement PRINTING		Category/ Type	Transaction ID : SB17.I14820
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	485.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. I360, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2024
Mailing Address 2300 CLARENDON BOULEVARD STE 800		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22201
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14763
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. I360, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2024
Mailing Address 2300 CLARENDON BOULEVARD STE 800		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22201
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14815
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. I360, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 25 / 2024
Mailing Address 2300 CLARENDON BOULEVARD STE 800		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22201
Purpose of Disbursement SOFTWARE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14858
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 60			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. METRO MINI STORAGE</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2024
Mailing Address 100 METRO PKWY		FEC Identification Number C
City PELHAM	State AL	Zip Code 35124-1171
Purpose of Disbursement STORAGE UNIT RENTAL		Amount of Each Disbursement this Period 228.00
Candidate Name	Category/ Type	Transaction ID : SB17.I14758
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. METRO MINI STORAGE</b>		Date of Disbursement MM / DD / YYYY 08 / 20 / 2024
Mailing Address 100 METRO PKWY		FEC Identification Number C
City PELHAM	State AL	Zip Code 35124-1171
Purpose of Disbursement STORAGE UNIT RENTAL		Amount of Each Disbursement this Period 228.00
Candidate Name	Category/ Type	Transaction ID : SB17.I14801
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. METRO MINI STORAGE</b>		Date of Disbursement MM / DD / YYYY 09 / 19 / 2024
Mailing Address 100 METRO PKWY		FEC Identification Number C
City PELHAM	State AL	Zip Code 35124-1171
Purpose of Disbursement STORAGE UNIT RENTAL		Amount of Each Disbursement this Period 228.00
Candidate Name	Category/ Type	Transaction ID : SB17.I14852
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	684.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**A. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S. MILLEDGE AVE  
STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 12 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 2061.94

Transaction ID : SB17.I14745

Memo Item

Full Name (Last, First, Middle Initial)

**B. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S. MILLEDGE AVE  
STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 21 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 2133.35

Transaction ID : SB17.I14755

Memo Item

Full Name (Last, First, Middle Initial)

**C. PROFESSIONAL DATA SERVICES**

Mailing Address 824 S. MILLEDGE AVE  
STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 26 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 2088.49

Transaction ID : SB17.I14804

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 6283.78

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. STARNES MEDIA</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2024
Mailing Address PO BOX 530341		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35253-0341
Purpose of Disbursement ADVERTISING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4752.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14827
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. STARNES MEDIA</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2024
Mailing Address PO BOX 530341		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35253-0341
Purpose of Disbursement ADVERTISING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 2041.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14849
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. THE ELEVATED GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2024
Mailing Address 410 1ST STREET, SE STE. 310		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 3703.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.I14746
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10497.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

**A. THE ELEVATED GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 410 1ST STREET, SE STE. 310

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 15 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 333.63

Transaction ID : SB17.I14748

Memo Item

**B. THE LOLLAR GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 800 CORPORATE PKWY STE 100

City BIRMINGHAM State AL Zip Code 35242-5470

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 03 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 8063.00

Transaction ID : SB17.I14733

Memo Item

**C. THE LOLLAR GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 800 CORPORATE PKWY STE 100

City BIRMINGHAM State AL Zip Code 35242-5470

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 30 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 7000.00

Transaction ID : SB17.I14766

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 15396.63

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE LOLLAR GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2024
Mailing Address 800 CORPORATE PKWY STE 100		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35242-5470
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 7058.40
Candidate Name		Transaction ID : SB17.I14792
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE LOLLAR GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2024
Mailing Address 800 CORPORATE PKWY STE 100		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35242-5470
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 7000.00
Candidate Name		Transaction ID : SB17.I14833
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE MCINSTOSH GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2024
Mailing Address 9203 ESPLANADE DRIVE		FEC Identification Number C
City DALLAS	State TX	Zip Code 75220
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 1750.00
Candidate Name		Transaction ID : SB17.I14802
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15808.40
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2024
Mailing Address 233 S WACKER DR		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606-7147
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 482.30
Candidate Name		Transaction ID : SB17.I14772
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2024
Mailing Address 233 S WACKER DR		FEC Identification Number C
City CHICAGO	State IL	Zip Code 60606-7147
Purpose of Disbursement TRAVEL EXPENSE		Amount of Each Disbursement this Period 906.35
Candidate Name		Transaction ID : SB17.I14853
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WELDEN HOGAN STRATEGIES</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2024
Mailing Address 1807 WINNSBORO ROAD		FEC Identification Number C
City BIRMINGHAM	State AL	Zip Code 35213-1742
Purpose of Disbursement FUNDRAISING CONSULTING		Amount of Each Disbursement this Period 5000.00
Candidate Name		Transaction ID : SB17.I14768
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6388.65
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)

**A. WELDEN HOGAN STRATEGIES**

Mailing Address 1807 WINNSBORO ROAD

City BIRMINGHAM State AL Zip Code 35213-1742

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 5000.00

Transaction ID : SB17.I14796

Memo Item

Full Name (Last, First, Middle Initial)

**B. WELDEN HOGAN STRATEGIES**

Mailing Address 1807 WINNSBORO ROAD

City BIRMINGHAM State AL Zip Code 35213-1742

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 23 / 2024

FEC Identification Number: C

Amount of Each Disbursement this Period: 5000.00

Transaction ID : SB17.I14846

Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD  
STE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 08 / 2024

FEC Identification Number: C C00694323

Amount of Each Disbursement this Period: 0.16

Transaction ID : SB17.I14742

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 10000.16

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2024
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C 000694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.06
Candidate Name		Transaction ID : SB17.I14749
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 21 / 2024
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C 000694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.18
Candidate Name		Transaction ID : SB17.I14760
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2024
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C 000694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 20.35
Candidate Name		Transaction ID : SB17.I14762
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	20.59
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 11 / 2024
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.31
Candidate Name	Category/Type	Transaction ID : SB17.I14775
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2024
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 2.09
Candidate Name	Category/Type	Transaction ID : SB17.I14790
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 25 / 2024
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.11
Candidate Name	Category/Type	Transaction ID : SB17.I14793
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2024
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.40
Candidate Name	Category/Type	Transaction ID : SB17.I14817
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2024
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.23
Candidate Name	Category/Type	Transaction ID : SB17.I14822
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WINRED TECHNICAL SERVICES LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2024
Mailing Address 1776 WILSON BLVD STE 530		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement CC TRANSACTION FEES		Amount of Each Disbursement this Period 0.07
Candidate Name	Category/Type	Transaction ID : SB17.I14832
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.70
<b>TOTAL</b> This Period (last page this line number only).....▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 60	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. WINRED TECHNICAL SERVICES LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2024
Mailing Address 1776 WILSON BLVD STE 530			FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219	Amount of Each Disbursement this Period 0.01
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type	Transaction ID : SB17.114847
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.01
<b>TOTAL</b> This Period (last page this line number only).....▶	108733.42

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 60	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial)  
**A. DOBSON FOR CONGRESS**

Mailing Address PO BOX 6051

City MONTGOMERY State AL Zip Code 36106

Purpose of Disbursement CONTRIBUTION

Candidate Name DOBSON, CAROLEENE, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: AL District: 02

Date of Disbursement: 07 / 10 / 2024

FEC Identification Number: C C00855494

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB21.I14743

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ELECTGABEEVANS.COM**

Mailing Address PO BOX 350608

City WESTMINSTER State CO Zip Code 80035

Purpose of Disbursement CONTRIBUTION

Candidate Name EVANS, TIMOTHY, GABRIEL JOSEPH, ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CO District: 08

Date of Disbursement: 08 / 26 / 2024

FEC Identification Number: C C00849844

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.I14806

Memo Item

Full Name (Last, First, Middle Initial)  
**C. MIKE GARCIA FOR CONGRESS**

Mailing Address 1451 QUAIL STREET, SUITE 101

City NEWPORT BEACH State CA Zip Code 92660

Purpose of Disbursement CONTRIBUTION

Candidate Name GARCIA, MICHAEL, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CA District: 25

Date of Disbursement: 08 / 26 / 2024

FEC Identification Number: C C00701102

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.I14805

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 4000.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 60	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. PAUL JUNGE FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2024
Mailing Address PO BOX 2201		FEC Identification Number C C00726687
City BRIGHTON	State MI	Zip Code 48116-6001
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name JUNGE, PAUL, , ,		Transaction ID : SB21.I14803
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MI District: 08	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. ROB FOR PA</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2024
Mailing Address 11 DOCK ST BOX 971		FEC Identification Number C C00852137
City PITTSTON	State PA	Zip Code 18640
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name BRESNAHAN, ROB, , ,		Transaction ID : SB21.I14808
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA District: 08	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. THERIAULT FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2024
Mailing Address PO BOX 291		FEC Identification Number C C00852061
City FORT KENT	State ME	Zip Code 04743
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name THERIAULT, AUSTIN, LEO, ,		Transaction ID : SB21.I14807
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ME District: 02	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 60	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gary Palmer for Congress**

Full Name (Last, First, Middle Initial) <b>A. NRCC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2024
Mailing Address 320 FIRST STREET SE		FEC Identification Number C C00075820
City WASHINGTON	State DC	Zip Code 20003-1838
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 1587.13
Candidate Name		Transaction ID : SB21.114813
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1587.13
<b>TOTAL</b> This Period (last page this line number only).....▶	8587.13