

**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

Amanda for Georgia

ADDRESS (number and street)

P.O. Box 60338

Check if different
than previously
reported. (ACC)

Savannah

GA

31420

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00914465

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

GA

01

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
05 / 19 / 2026in the
State of

GA

(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
04 / 01 / 2026

through

M M / D D / Y Y Y Y
04 / 29 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer Olsziewski, Vincent, Joseph, , Jr.

Signature of Treasurer

Olsziewski, Vincent, Joseph, , Jr.

Date

M M / D D / Y Y Y Y
05 / 04 / 2026

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

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Amanda for Georgia

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	6

	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))	18035.00	73270.96
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	18035.00	73270.96
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	18487.13	77320.27
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	18487.13	77320.27
8. Cash on Hand at Close of Reporting Period (from Line 27)	13463.08	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	17512.39	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Amanda for Georgia

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
04 / 29 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

11900.00

45292.36

(ii) Unitemized

6135.00

27978.60

(iii) TOTAL of contributions
from individuals ▶

18035.00

73270.96

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

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

18035.00

73270.96

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

6411.39

17512.39

(b) All Other Loans.....

0.00

0.00

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

6411.39

17512.39

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

24446.39

90783.35

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.....

18487.13

77320.27

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0.00

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

18487.13

77320.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

7503.82

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

24446.39

25. SUBTOTAL (add Line 23 and Line 24).....

31950.21

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

18487.13

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

13463.08

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 28

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

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Altschiller, Evelina, , ,

A.

Mailing Address 604 Barnard Street 604 Barnard Str

City

Savannah

State

GA

Zip Code

31401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2015.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 27 2026

Transaction ID : A-664

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Bell Rose, Stephanie, , ,

B.

Mailing Address 138 Governor Street

City

Providence

State

RI

Zip Code

02906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 29 2026

Transaction ID : A-678

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Caldwell, Blake, , ,

C.

Mailing Address 4 Marsh Island Lane

City

Savannah

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 28 2026

Transaction ID : A-672

Amount of Each Receipt this Period

1000.00

☐ Memo Item

2200.00

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

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Carr, Cynthia, , ,

A.

Mailing Address 17 White Oak Bluff

City

Savannah

State

GA

Zip Code

31405

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 27 2026

Transaction ID : A-666

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Eichholz, Richard, , ,

B.

Mailing Address 2500 Peachtree Road Northwest

City

Atlanta

State

GA

Zip Code

30305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Buyrite

Occupation

Self

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 18 2026

Transaction ID : A-627

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gaines, Brenda, , ,

C.

Mailing Address 3 Sandsfield Way

City

Savannah

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Self

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2080.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 01 2026

Transaction ID : A-641

Amount of Each Receipt this Period

1080.00

☐ Memo Item

IN KIND:

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

1580.00

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

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

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Gaines, Brenda, , ,

A.

Mailing Address 3 Sandsfield Way

City

Savannah

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Self

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		22		2026

Transaction ID : A-647

Amount of Each Receipt this Period

420.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Guthrie-papy, Coco, , ,

Mailing Address 8605 Gohler Avenue

City

Savannah

State

GA

Zip Code

31406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mary's Place

Occupation

Program Director

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		26		2026

Transaction ID : A-659

Amount of Each Receipt this Period

1000.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

Haden, John, , ,

Mailing Address 180 Kingfisher Circle

City

Pooler

State

GA

Zip Code

31322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		07		2026

Transaction ID : A-604

Amount of Each Receipt this Period

250.00



Memo Item

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

1670.00

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

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Haden, John, , ,

A. Mailing Address 180 Kingfisher Circle

City
Pooler

State
GA

Zip Code
31322

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 21 2026

Transaction ID : A-638

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hull, Megan, , ,

B. Mailing Address 11 Sierra Avenue

City
Piedmont

State
CA

Zip Code
94611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Activist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 02 2026

Transaction ID : A-593

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Johnson, Susan, , ,

C. Mailing Address 209 Falligant Avenue

City
Savannah

State
GA

Zip Code
31410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 10 2026

Transaction ID : A-614

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1500.00

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

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

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Karp, Karen, , ,

A. Mailing Address 822 Greenwich StreetCity
New YorkState
NYZip Code
10014FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Travel Coordinator

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 27 2026

Transaction ID : A-665

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Kelley, Cindy, , ,

B. Mailing Address 323 West Jones StreetCity
SavannahState
GAZip Code
31401FEC ID number of contributing
federal political committee.

C

Name of Employer
Not EmployedOccupation
Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 28 2026

Transaction ID : A-673

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Knowles, Shree, , ,

C. Mailing Address 810 Armstrong LaneCity
ColumbiaState
TNZip Code
38401FEC ID number of contributing
federal political committee.

C

Name of Employer
Pivot GroupOccupation
Consultant

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 24 2026

Transaction ID : A-645

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

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 10 OF 28

☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Lelaurin, Maria, , ,

A. Mailing Address 209 Falligant Avenue

City

Savannah

State

GA

Zip Code

31410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 10 2026

Transaction ID : A-611

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Levett, Marie, , ,

B. Mailing Address PO Box 60224

City

Savannah

State

GA

Zip Code

31420

FEC ID number of contributing
federal political committee.

C

Name of Employer

AASA

Occupation

Administartor

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 10 2026

Transaction ID : A-615

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mattingly, John, , ,

C. Mailing Address 4 Bridgewater Dr

City

Thunderburg

State

GA

Zip Code

31410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 07 2026

Transaction ID : A-606

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1000.00

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)

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

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Parker, Gabriella, , ,

A.

Mailing Address 1021 Waterstone Dr

City

Lebanon

State

TN

Zip Code

37090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Civic Nation

Occupation

Associate Director

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 04 2026

Transaction ID : A-597

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

Pollack, Judith, , ,

B.

Mailing Address 16 washington road

City

Cromwell

State

CT

Zip Code

06416

FEC ID number of contributing
federal political committee.

C

Name of Employer

BENGTON & SMITH

Occupation

CPA

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 12 2026

Transaction ID : A-612

Amount of Each Receipt this Period

50.00



Memo Item

Full Name (Last, First, Middle Initial)

Profit, Ashlynn, , ,

C.

Mailing Address 701 2nd Street Northeast

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Civic Nation

Occupation

Director of Communications

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 10 2026

Transaction ID : A-610

Amount of Each Receipt this Period

100.00



Memo Item

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

200.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Roche, Joyce, , ,

A. Mailing Address 2 Flowing Wells Lane

City

Savannah

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 03 2026

Transaction ID : A-595

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Shimp, Michele, , ,

B. Mailing Address 6 Palmetto Bay Road

City

Savannah

State

GA

Zip Code

31410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Coming

Occupation

Manager

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 20 2026

Transaction ID : A-635

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Smith, Carole, , ,

C. Mailing Address 180 Kingfisher Circle

City

Savannah

State

GA

Zip Code

31322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 24 2026

Transaction ID : A-643

Amount of Each Receipt this Period

500.00

☐ Memo Item

1750.00

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Smith, Douglas, , ,

A.

Mailing Address 105 Wren Ct

City

Savannah

State

GA

Zip Code

31419

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 15 2026

Transaction ID : A-621

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Toth, Mitzi, , ,

B.

Mailing Address 144 Waterway Dr

City

Savannah

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 29 2026

Transaction ID : A-682

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Weems, Diane, , ,

C.

Mailing Address 7 Modena Island Drive

City

Savannah

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not Employed

Occupation

Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 29 2026

Transaction ID : A-677

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1000.00

11900.00

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

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

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

Hollowell, Amanda, , ,

A. Mailing Address P.o. Box 60338

City
SavannahState
GAZip Code
31420FEC ID number of contributing
federal political committee.

C H6GA01158

Name of Employer
SelfOccupation
Candidate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

17512.39

Date of Receipt

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

Transaction ID : A-634

Amount of Each Receipt this Period

6411.39

☐ Memo ItemB. Full Name (Last, First, Middle Initial)
Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo ItemC. Full Name (Last, First, Middle Initial)
Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

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

6411.39

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

6411.39

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address PO Box 441146

Date of Disbursement

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

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C

Purpose of Disbursement
Merchant fees

001

Amount of Each Disbursement this Period

300.00

Transaction ID : B-688

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address PO Box 441146

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	6

City
SomervilleState
MAZip Code
02144

FEC Identification Number

C

Purpose of Disbursement
Merchant fees

001

Amount of Each Disbursement this Period

620.58

Transaction ID : B-725

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Canva

Mailing Address 75 Varick Street

Date of Disbursement

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

City
New YorkState
NYZip Code
10013

FEC Identification Number

C

Purpose of Disbursement
Graphics

001

Amount of Each Disbursement this Period

449.40

Transaction ID : B-684

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1369.98

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Canva

Mailing Address 75 Varick Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	6

City
New YorkState
NYZip Code
10013

FEC Identification Number

C

Purpose of Disbursement
Graphics

001

Amount of Each Disbursement this Period

12.95

Transaction ID : B-706

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Canva

Mailing Address 75 Varick Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	6

City
New YorkState
NYZip Code
10013

FEC Identification Number

C

Purpose of Disbursement
Graphics

001

Amount of Each Disbursement this Period

171.20

Transaction ID : B-707

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Canva

Mailing Address 75 Varick Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	2	6

City
New YorkState
NYZip Code
10013

FEC Identification Number

C

Purpose of Disbursement
Graphics

001

Amount of Each Disbursement this Period

230.05

Transaction ID : B-708

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

414.20

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

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

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Civitech

Mailing Address 1023 Springdale Road

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	6

City
AustinState
TXZip Code
78721

FEC Identification Number

C

Purpose of Disbursement
Software

001

Amount of Each Disbursement this Period

100.00

Transaction ID : B-691

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Facebook

Mailing Address 1 Hacker Way

Date of Disbursement

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

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Digital ads

001

Amount of Each Disbursement this Period

250.00

Transaction ID : B-685

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Facebook

Mailing Address 1 Hacker Way

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	6

City
Menlo ParkState
CAZip Code
94025

FEC Identification Number

C

Purpose of Disbursement
Digital ads

001

Amount of Each Disbursement this Period

152.38

Transaction ID : B-710

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

502.38

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

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

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Fedex

Mailing Address 942 South Shady Grove Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2026

City
MemphisState
TNZip Code
38120

FEC Identification Number

C

Purpose of Disbursement
Postage

001

Amount of Each Disbursement this Period

133.75

Transaction ID : B-697

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Gaines, Brenda, , ,

Mailing Address 3 Sandsfield Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		01		2026

City
SavannahState
GAZip Code
31411

FEC Identification Number

C

Purpose of Disbursement
IN KIND:Category/
Type

Amount of Each Disbursement this Period

1080.00

Transaction ID : B-641

☐ Memo Item

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Hall, Julius, , ,

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2026

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

001

Amount of Each Disbursement this Period

125.00

Transaction ID : B-693

☐ Memo Item

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

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

1338.75

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Hall, Julius, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Transaction ID : B-704

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hall, Julius, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B-705

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hall, Julius, , ,

Mailing Address

City

State

Zip Code

Purpose of Disbursement

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1080.00

Transaction ID : B-711

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

2880.00

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

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

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

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Harrison Tran

Mailing Address 110 Lake Shore Drive

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

City
SavannahState
GAZip Code
31419

FEC Identification Number

C

Purpose of Disbursement
Campaign Consulting

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

181.25

Transaction ID : B-696

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Harrison Tran

Mailing Address 110 Lake Shore Drive

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	6

City
SavannahState
GAZip Code
31419

FEC Identification Number

C

Purpose of Disbursement
Campaign Consulting

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

280.83

Transaction ID : B-699

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Hollowell, Amanda, , ,

Mailing Address P.o. Box 60338

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	6

City
SavannahState
GAZip Code
31420

FEC Identification Number

C

Purpose of Disbursement
Reimbursement for expenses

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

461.00

Transaction ID : B-712

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

923.08

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

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

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

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Sharpe, Minnie, , ,

Mailing Address 235 Peachtree Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		27		2026

City
AtlantaState
GAZip Code
30303

FEC Identification Number

C

Purpose of Disbursement
Staff

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

400.00

Transaction ID : B-709

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Smith, Scout, , ,

Mailing Address 501 Pulliam Street Southwest

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2026

City
AtlantaState
GAZip Code
30312

FEC Identification Number

C

Purpose of Disbursement
Campaign Consulting

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B-687

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Smith, Scout, , ,

Mailing Address 501 Pulliam Street Southwest

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2026

City
AtlantaState
GAZip Code
30312

FEC Identification Number

C

Purpose of Disbursement
Campaign Consulting

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B-700

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1400.00

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Sole Strategies

Mailing Address 1930 18th Street Northwest

Date of Disbursement

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

City
WashingtonState
DCZip Code
20009

FEC Identification Number

C

Purpose of Disbursement
Fundraising consulting

001

Amount of Each Disbursement this Period

3000.00

Transaction ID : B-628

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Solidarity Tech

Mailing Address Web based

Date of Disbursement

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

City

State
GA

Zip Code

FEC Identification Number

C

Purpose of Disbursement
IT

001

Amount of Each Disbursement this Period

605.58

Transaction ID : B-633

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Squarespace

Mailing Address 225 Varick Street

Date of Disbursement

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

City
New YorkState
NYZip Code
10014

FEC Identification Number

C

Purpose of Disbursement
Web services

001

Amount of Each Disbursement this Period

3.25

Transaction ID : B-683

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

3608.83

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
Web services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

50.40

Transaction ID : B-690

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
Web services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

30.00

Transaction ID : B-692

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Trident Strategies

Mailing Address 824 Atlanta Street

City
SavannahState
GAZip Code
31405Purpose of Disbursement
Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1505.00

Transaction ID : B-631

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

1585.40

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Trident Strategies

Mailing Address 824 Atlanta Street

City
SavannahState
GAZip Code
31405Purpose of Disbursement
Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

830.00

Transaction ID : B-703

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 2 North Fahm Street

City
SavannahState
GAZip Code
31401Purpose of Disbursement
Postage

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

308.20

Transaction ID : B-694

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Vega, Hannah, , ,

Mailing Address 1528 Frazier Road

City
DecaturState
GAZip Code
30033Purpose of Disbursement
Operational Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

307.75

Transaction ID : B-686

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

1445.95

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Amanda for Georgia

Full Name (Last, First, Middle Initial)

A. Vega, Hannah, , ,

Mailing Address 1528 Frazier Road

City
DecaturState
GAZip Code
30033Purpose of Disbursement
Operational Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1125.00

Transaction ID : B-630

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Vega, Hannah, , ,

Mailing Address 1528 Frazier Road

City
DecaturState
GAZip Code
30033Purpose of Disbursement
Operational Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B-701

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Vega, Hannah, , ,

Mailing Address 1528 Frazier Road

City
DecaturState
GAZip Code
30033Purpose of Disbursement
Operational Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B-702

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

2625.00

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

18093.57

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

PAGE 26 OF 28

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

NAME OF COMMITTEE (In Full)

Transaction ID : C-96

Amanda for Georgia

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Hollowell, Amanda, , ,

Mailing Address

P.o. Box 60338

City

Savannah

State

GA

ZIP Code

31420

☐ Personal Funds of the Candidate

Original Amount of Loan

2881.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2881.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 / 24 / 2025

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

2881.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 27 OF 28

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

NAME OF COMMITTEE (In Full)

Transaction ID : C-570

Amanda for Georgia

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Hollowell, Amanda, , ,

Mailing Address

P.o. Box 60338

City

Savannah

State

GA

ZIP Code

31420

☐ Personal Funds of the Candidate

Original Amount of Loan

8220.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

8220.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 11 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

8220.00

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

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

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

PAGE 28 OF 28

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

NAME OF COMMITTEE (In Full)

Transaction ID : C-634

Amanda for Georgia

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Hollowell, Amanda, , ,

Mailing Address

P.o. Box 60338

City

Savannah

State

GA

ZIP Code

31420

☐ Personal Funds of the Candidate

Original Amount of Loan

6411.39

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

6411.39

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 01 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

6411.39

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

17512.39

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