FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **TYPE OR PRINT ▼** — Example: If typing, type over the lines. 12FE4M5

REPUBLICAN STATE COMMITTEE OF DELAWARE

ADDRESS (number and street) 501 HAWLEY STREET

☐ Check if different than previously reported. (ACC)

WILMINGTON | DE | 19805

2. **FEC IDENTIFICATION NUMBER ▼** C C00172510

CITY ▲ | STATE ▲ | ZIP CODE ▲

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

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)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

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

(c) 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

(d) 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 07 / 01 / 2026 through 07 / 31 / 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 TRUONO, GENE, , ,

Signature of Treasurer *TRUONO, GENE, , ,* Date 08 / 20 / 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							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

REPUBLICAN STATE COMMITTEE OF DELAWARE

Report Covering the Period: From: 07 / 01 / 2026 To: 07 / 31 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2026		1113.46
(b) Cash on Hand at Beginning of Reporting Period	4062.16	
(c) Total Receipts (from Line 19)	55052.00	266884.85
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	59114.16	267998.31
7. Total Disbursements (from Line 31)	39580.42	248464.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19533.74	19533.74
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)	11000.00	

☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

DETAILED SUMMARY PAGE
of Receipts

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

Write or Type Committee Name

REPUBLICAN STATE COMMITTEE OF DELAWARE

Report Covering the Period: From: 07/01/2026 To: 07/31/2026

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	12252.00	113282.23
(ii) Unitemized	3300.00	25915.14
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	15552.00	139197.37
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	15552.00	144197.37
12. Transfers From Affiliated/Other Party Committees	39500.00	58500.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	2500.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	61687.48
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	61687.48
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	55052.00	266884.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	55052.00	205197.37

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	5486.21	22392.87
(ii) Non-Federal Share	20638.53	84240.02
(b) Other Federal Operating Expenditures	8455.68	129895.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	34580.42	236528.27
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	5000.00	10000.00
(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 28(a), (b), and (c)) ▶	5000.00	10000.00
29. Other Disbursements (Including Non-Federal Donations)	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	1936.30
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	1936.30
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	39580.42	248464.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	18941.89	164224.55

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15552.00	144197.37
34. Total Contribution Refunds (from Line 28(d))	5000.00	10000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10552.00	134197.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	13941.89	152288.25
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	2500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	13941.89	149788.25

Image# 202608209903334458

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 6 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
JULIAN, RICHARD, J, ,

Mailing Address 111 GREENSPRING RD

City: WILMINGTON | State: DE | Zip Code: 19807

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): INFORMATION REQUESTED
Occupation (for Individual): INFORMATION REQUESTED

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 2500.00

Date of Receipt: 07 / 14 / 2026
Transaction ID : SA11AI.177340483

Amount of Each Receipt this Period: 2500.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
SMITH, MELANIE, A, ,

Mailing Address 2656 MUD MILL RD

City: CAMDEN | State: DE | Zip Code: 19934

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): INFORMATION REQUESTED
Occupation (for Individual): INFORMATION REQUESTED

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 07 / 14 / 2026
Transaction ID : SA11AI.177337801

Amount of Each Receipt this Period: 1000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City: ARLINGTON | State: VA | Zip Code: 22203

FEC ID number of contributing federal political committee: C C00694323

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 73617.10

Date of Receipt: 07 / 06 / 2026
Transaction ID : SA11AI.172552806

Amount of Each Receipt this Period: 40.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

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

Image# 202608209903334459

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 7 OF 33

☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ANDERSON, DAVID, , ,

Mailing Address 217 CECIL ST

City: DOVER | State: DE | Zip Code: 19904

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CITY OF DOVER
Occupation (for Individual): COUNCILMAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 650.00

Date of Receipt: 07 / 02 / 2026
Transaction ID : SA11AI.172554075

Amount of Each Receipt this Period: 10.00

☐ Memo Item

EARMARKED THROUGH WINRED

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City: ARLINGTON | State: VA | Zip Code: 22203

FEC ID number of contributing federal political committee: C C00694323

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 73617.10

Date of Receipt: 07 / 13 / 2026
Transaction ID : SA11AI.172788919

Amount of Each Receipt this Period: 249.76

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VEST, MICHAEL, , ,

Mailing Address 13 WINEBERRY DRIVE

City: HOCKESSIN | State: DE | Zip Code: 19707

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CHRISTIANA CARE
Occupation (for Individual): PHYSICIAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 1100.00

Date of Receipt: 07 / 06 / 2026
Transaction ID : SA11AI.172789077

Amount of Each Receipt this Period: 100.00

☐ Memo Item

EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 110.00

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

Image# 202608209903334460

SCHEDULE A (FEC Form 3X)
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 ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City: ARLINGTON | State: VA | Zip Code: 22203

FEC ID number of contributing federal political committee: C C00694323

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 73617.10

Date of Receipt: 07 / 20 / 2026
Transaction ID : SA11AI.177404384

Amount of Each Receipt this Period: 7538.57

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CRAGG, JAMES, , ,

Mailing Address 1036 SNELL ISLE BLVD NE

City: SAINT PETERSBURG | State: FL | Zip Code: 33704

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 07 / 13 / 2026
Transaction ID : SA11AI.177404737

Amount of Each Receipt this Period: 5000.00

☐ Memo Item

EARMARKED THROUGH WINRED

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
GRAHAM, DAVID, , ,

Mailing Address 614 MASSEYS MILLPOND RD

City: SMYRNA | State: DE | Zip Code: 19977

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 07 / 14 / 2026
Transaction ID : SA11AI.177404734

Amount of Each Receipt this Period: 2500.00

☐ Memo Item

EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 7500.00

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

Image# 202608209903334461

SCHEDULE A (FEC Form 3X)
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 ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KAUFFMAN, DONALD, , , JR

Mailing Address 125 DYER AVENUE

City: NEW CASTLE | State: DE | Zip Code: 19720

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 255.00

Date of Receipt: 07 / 16 / 2026
Transaction ID : SA11AI.177404728

Amount of Each Receipt this Period: 100.00

☐ Memo Item

EARMARKED THROUGH WINRED

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City: ARLINGTON | State: VA | Zip Code: 22203

FEC ID number of contributing federal political committee: C C00694323

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 73617.10

Date of Receipt: 07 / 27 / 2026
Transaction ID : SA11AI.177606347

Amount of Each Receipt this Period: 360.22

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ANDERSON, DAVID, , ,

Mailing Address 217 CECIL ST

City: DOVER | State: DE | Zip Code: 19904

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): CITY OF DOVER
Occupation (for Individual): COUNCILMAN

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 650.00

Date of Receipt: 07 / 23 / 2026
Transaction ID : SA11AI.177607279

Amount of Each Receipt this Period: 10.00

☐ Memo Item

EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 110.00

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

Image# 202608209903334462

SCHEDULE A (FEC Form 3X)
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 ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
DILORENZO, ERMANNO, , ,

Mailing Address 1016 TALON LANE

City: WILMINGTON | State: DE | Zip Code: 19807

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): SELF-EMPLOYED
Occupation (for Individual): ENGINEER

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 206.23

Date of Receipt: 07 / 17 / 2026
Transaction ID : SA11AI.177607293

Amount of Each Receipt this Period: 25.00

☐ Memo Item

EARMARKED THROUGH WINRED

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KILBY, SHEPPARD, , ,

Mailing Address 24337 FERNWOOD ST

City: SEAFORD | State: DE | Zip Code: 19973

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 380.00

Date of Receipt: 07 / 20 / 2026
Transaction ID : SA11AI.177607282

Amount of Each Receipt this Period: 50.00

☐ Memo Item

EARMARKED THROUGH WINRED

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MURPHY, THOMAS, , ,

Mailing Address 10250 FAWN ROAD

City: GREENWOOD | State: DE | Zip Code: 19950

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 350.00

Date of Receipt: 07 / 21 / 2026
Transaction ID : SA11AI.177607281

Amount of Each Receipt this Period: 50.00

☐ Memo Item

EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 125.00

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

Image# 202608209903334463

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City: ARLINGTON | State: VA | Zip Code: 22203

FEC ID number of contributing federal political committee: C C00694323

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 73617.10

Date of Receipt: 07 / 31 / 2026
Transaction ID : SA11AI.177877452

Amount of Each Receipt this Period: 878.95

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CARTOLANO, BRUNO, , ,

Mailing Address 13 CAROLYN COURT

City: HOCKESSIN | State: DE | Zip Code: 19707

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 30 / 2026
Transaction ID : SA11AI.177877818

Amount of Each Receipt this Period: 500.00

☐ Memo Item

EARMARKED THROUGH WINRED

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LAZAROFF, LINDA, , ,

Mailing Address 930 RIVER BIRCH CIRCLE

City: MIDDLETOWN | State: DE | Zip Code: 19709

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 07 / 25 / 2026
Transaction ID : SA11AI.177877830

Amount of Each Receipt this Period: 10.00

☐ Memo Item

EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 510.00

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

Image# 202608209903334464

SCHEDULE A (FEC Form 3X)
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 ☐ 12 ☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PACK, LARRY, , ,

Mailing Address 29 ATLANTIC AVENUE
STE L

City: OCEAN VIEW | State: DE | Zip Code: 19970

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 350.00

Date of Receipt: 07 / 29 / 2026
Transaction ID : SA11AI.177877821

Amount of Each Receipt this Period: 50.00

☐ Memo Item

EARMARKED THROUGH WINRED

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WINRED

Mailing Address 4250 FAIRFAX DR
STE 600

City: ARLINGTON | State: VA | Zip Code: 22203

FEC ID number of contributing federal political committee: C C00694323

Name of Employer (for Individual):
Occupation (for Individual):

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼: 73617.10

Date of Receipt: 07 / 31 / 2026
Transaction ID : SA11AI.178074698

Amount of Each Receipt this Period: 347.00

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AYENI, ALISON, , ,

Mailing Address 220 WICKERBERRY DR

City: MIDDLETOWN | State: DE | Zip Code: 19709

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For: ☐ Primary ☐ General ☐ Other (specify)

Aggregate Year-to-Date ▼: 347.00

Date of Receipt: 07 / 31 / 2026
Transaction ID : SA11AI.178075300

Amount of Each Receipt this Period: 50.00

☐ Memo Item

EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 100.00

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

Image# 202608209903334465

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
PAGE 13 OF 33

- [X] 11a
- [ ] 11b
- [ ] 11c
- [ ] 12
- [ ] 13
- [ ] 14
- [ ] 15
- [ ] 16
- [ ] 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AYENI, ALISON, , ,

Mailing Address 220 WICKERBERRY DR

City: MIDDLETOWN | State: DE | Zip Code: 19709

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual): RETIRED
Occupation (for Individual): RETIRED

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 347.00

Date of Receipt: 07 / 31 / 2026

Transaction ID : SA11AI.178075301

Amount of Each Receipt this Period: 297.00

- [ ] Memo Item

EARMARKED THROUGH WINRED

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City | State | Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) | Occupation (for Individual)

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y

Amount of Each Receipt this Period

- [ ] Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City | State | Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) | Occupation (for Individual)

Receipt For:
- [ ] Primary
- [ ] General
- [ ] Other (specify)

Aggregate Year-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) ▶ 297.00

TOTAL This Period (last page this line number only) ▶ 12252.00

Image# 202608209903334466

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City: WASHINGTON | State: DC | Zip Code: 20003

FEC ID number of contributing federal political committee: C C00003418

Name of Employer (for Individual) | Occupation (for Individual)

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 58500.00

Date of Receipt: 07 / 02 / 2026

Transaction ID : SA12.177887974

Amount of Each Receipt this Period: 4500.00

☐ Memo Item

TRANSFER

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City: WASHINGTON | State: DC | Zip Code: 20003

FEC ID number of contributing federal political committee: C C00003418

Name of Employer (for Individual) | Occupation (for Individual)

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 58500.00

Date of Receipt: 07 / 09 / 2026

Transaction ID : SA12.177887984

Amount of Each Receipt this Period: 35000.00

☐ Memo Item

TRANSFER

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City | State | Zip Code

FEC ID number of contributing federal political committee: C

Name of Employer (for Individual) | Occupation (for Individual)

Receipt For:
☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-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) ▶ 39500.00

TOTAL This Period (last page this line number only) ▶ 39500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A.
Full Name (Last, First, Middle Initial)
ADVOCACY LAB LLC
Mailing Address 15 RUBY ST
City: NEW HAVEN | State: CT | Zip Code: 06515
Purpose of Disbursement: SOFTWARE SUBSCRIPTIONS
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 20 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11637
Amount of Each Disbursement this Period: 34.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
CAMPAIGN NUCLEUS LLC
Mailing Address 3745 MEDINA RD
City: MEDINA | State: OH | Zip Code: 44256
Purpose of Disbursement: SOFTWARE SUBSCRIPTION
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 13 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11628
Amount of Each Disbursement this Period: 568.29
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
DELAWARE STATE FAIR
Mailing Address 18500 S DUPONT HWY
City: HARRINGTON | State: DE | Zip Code: 19952
Purpose of Disbursement: FAIR BOOTH CONTRACT
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 20 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11628
Amount of Each Disbursement this Period: 4500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5102.29

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

Image# 202608209903334468

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name (Last, First, Middle Initial)
LINKEDIN CORPORATION
Mailing Address 1000 W MAUDE AVENUE
City: SUNNYVALE | State: CA | Zip Code: 94085
Purpose of Disbursement: SOFTWARE SUBSCRIPTION
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 15 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11630
Amount of Each Disbursement this Period: 1300.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial)
NUMINAR ANALYTICS
Mailing Address 1201 WILSON BLVD
City: ARLINGTON | State: VA | Zip Code: 22209
Purpose of Disbursement: SOFTWARE SUBSCRIPTIONS
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 01 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11630
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial)
REPUBLICAN NATIONAL COMMITTEE
Mailing Address 310 FIRST STREET SE
City: WASHINGTON | State: DC | Zip Code: 20003
Purpose of Disbursement: EVENT REGISTRATION FEE
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 15 / 2026
FEC Identification Number: C C00003418
Transaction ID : SB21B.1163(
Amount of Each Disbursement this Period: 145.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 2945.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A.
Full Name (Last, First, Middle Initial)
TD BANK
Mailing Address 101 HYGEIA DRIVE
City: NEWARK | State: DE | Zip Code: 19713
Purpose of Disbursement: BANK FEES
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 13 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11729
Amount of Each Disbursement this Period: 79.73
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
TD BANK
Mailing Address 101 HYGEIA DRIVE
City: NEWARK | State: DE | Zip Code: 19713
Purpose of Disbursement: BANK FEES
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 31 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11675
Amount of Each Disbursement this Period: 20.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
TD BANK
Mailing Address 101 HYGEIA DRIVE
City: NEWARK | State: DE | Zip Code: 19713
Purpose of Disbursement: BANK FEES
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 31 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11678
Amount of Each Disbursement this Period: 20.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 119.73

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B561
City: CHEYENNE | State: WY | Zip Code: 82001
Purpose of Disbursement: MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 06 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11594
Amount of Each Disbursement this Period: 12.21
☐ Memo Item

B.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B561
City: CHEYENNE | State: WY | Zip Code: 82001
Purpose of Disbursement: MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 13 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11615
Amount of Each Disbursement this Period: 10.24
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B561
City: CHEYENNE | State: WY | Zip Code: 82001
Purpose of Disbursement: MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 20 / 2026
FEC Identification Number: C
Transaction ID : SB21B.1163
Amount of Each Disbursement this Period: 251.43
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 273.88

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

Image# 202608209903334471

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES LLC
Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B561
City: CHEYENNE | State: WY | Zip Code: 82001
Purpose of Disbursement: MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 07 / 27 / 2026
FEC Identification Number: C
Transaction ID : SB21B.11652
Amount of Each Disbursement this Period: 14.78
☐ Memo Item

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

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

SUBTOTAL of Disbursements This Page (optional) ▶ 14.78

TOTAL This Period (last page this line number only) ▶ 8455.68

Image# 202608209903334472

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
21b | 22 | 23 | 26 | 27
X 28a | 28b | 28c | 29 | 30b

NAME OF COMMITTEE (In Full)
REPUBLICAN STATE COMMITTEE OF DELAWARE

A.
Full Name (Last, First, Middle Initial)
PARSONS, MICHELLE, , ,
Mailing Address 21 BETHANY FOREST DR
City: DAGSBORO | State: DE | Zip Code: 19939
Purpose of Disbursement: CONTRIBUTION REFUND
Candidate Name
Category/ Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Date of Disbursement: 07 / 10 / 2026
FEC Identification Number: C
Transaction ID : SB28A.11668
Amount of Each Disbursement this Period: 5000.00
Memo Item

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

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

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

TOTAL This Period (last page this line number only) ▶ 5000.00

Image# 202608209903334473

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 21 OF 33

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

Transaction ID : C9D0B0B237B2A4C16BDA

LOAN SOURCE Full Name (Last, First, Middle Initial)
TD BANK

N ☐ Memo Item

Election:
☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 101 HYGEIA DRIVE

City	State	ZIP Code
NEWARK	DE	19713-2048

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4500.00	0.00	4500.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
07 / 15 / 2025	NONE	0.00 % (apr)	☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 4500.00

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.

Image# 202608209903334474

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 22 OF 33

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

Transaction ID : C35D44F69E2D14AF9A5E

LOAN SOURCE Full Name (Last, First, Middle Initial)
TD BANK

N ☐ Memo Item

Election:
☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 101 HYGEIA DRIVE

City	State	ZIP Code
NEWARK	DE	19713-2048

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1500.00	0.00	1500.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
08 / 04 / 2025	NONE	0.00 % (apr)	☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 1500.00

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.

Image# 202608209903334475

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 23 OF 33

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

Transaction ID : CDA7666CD11DC4BB3B9A

LOAN SOURCE Full Name (Last, First, Middle Initial)
TD BANK

N ☐ Memo Item

Election:
☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 101 HYGEIA DRIVE

City	State	ZIP Code
NEWARK	DE	19713-2048

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
08 / 28 / 2025	NONE	0.00 % (apr)	☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 3000.00

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.

Image# 202608209903334476

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 24 OF 33

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

Transaction ID : C098760881C684DB8BAE

LOAN SOURCE Full Name (Last, First, Middle Initial)
TD BANK

N ☐ Memo Item

Election:
☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 101 HYGEIA DRIVE

City	State	ZIP Code
NEWARK	DE	19713-2048

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
10 / 14 / 2025	NONE	0.00 % (apr)	☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	

SUBTOTALS This Period This Page (optional) ▶ 1000.00

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.

Image# 202608209903334477

SCHEDULE C (FEC Form 3X)
LOANS

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

PAGE 25 OF 33

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

Transaction ID : C965C2C264F9240EFA5C

LOAN SOURCE Full Name (Last, First, Middle Initial)
TRUONO, EUGENE, , ,

N ☐ Memo Item

Election:
☐ Primary
☐ General
☐ Other (specify) ▼

Mailing Address 100 CENTER AVE

City	State	ZIP Code
WILMINGTON	DE	19807

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

TERMS

Date Incurred (M M / D D / Y Y Y Y)	Date Due (M M / D D / Y Y Y Y)	Interest Rate	Secured:
11 / 05 / 2025	NONE	0.00 % (apr)	☐ Yes ☒ No

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

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 1000.00

TOTALS This Period (last page in this line only) ▶ 11000.00

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

Image# 202608209903334478

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1163065** ☐ Memo Item

ADOBE SYSTEMS

Mailing Address 345 PARK AVE

City: SAN JOSE | State: CA | Zip Code: 95110

Purpose of Disbursement: SOFTWARE SUBSCRIPTION

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 80528.14

Date: 07/10/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
4.20	15.79	19.99

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162837** ☐ Memo Item

AMOROSO, DOMINIC, , ,

Mailing Address 201 E GAY ST APT 118

City: WEST CHESTER | State: PA | Zip Code: 19380

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 83528.14

Date: 07/16/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
630.00	2370.00	3000.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162795** ☐ Memo Item

AUSTIN & PRUITT

Mailing Address 2 BROOKSIDE DRIVE

City: WILMINGTON | State: DE | Zip Code: 19804

Purpose of Disbursement: UTILITIES

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 83593.14

Date: 07/02/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
13.65	51.35	65.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
647.85	2437.14	3084.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

Image# 202608209903334479

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162802** ☐ Memo Item

BILECKI, DEANNA, , ,

Mailing Address 4613 GRIFFIN DR

City: WILMINGTON | State: DE | Zip Code: 19808

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 84393.14

Date: 07/16/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
168.00	632.00	800.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162836** ☐ Memo Item

BILECKI, DEANNA, , ,

Mailing Address 4613 GRIFFIN DR

City: WILMINGTON | State: DE | Zip Code: 19808

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 85193.14

Date: 07/16/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
168.00	632.00	800.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1163420** ☐ Memo Item

CANVA

Mailing Address 75 EAST SANTA CLARA STREET

City: SAN JOSE | State: CA | Zip Code: 95113

Purpose of Disbursement: PRINTING EXPENSE

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 85293.14

Date: 07/16/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
21.00	79.00	100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
357.00	1343.00	1700.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

Image# 202608209903334480

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162785** ☐ Memo Item

FLOGAUS, DYLAN, , ,

Mailing Address 916 FAIRTHORNE AVE

City: WILMINGTON | State: DE | Zip Code: 19807

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 85731.94

Date: 07/10/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
92.15	346.65	438.80

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162835** ☐ Memo Item

FLOGAUS, DYLAN, , ,

Mailing Address 916 FAIRTHORNE AVE

City: WILMINGTON | State: DE | Zip Code: 19807

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 90231.94

Date: 07/10/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
945.00	3555.00	4500.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162807** ☐ Memo Item

IRETON, PAULA, , ,

Mailing Address 127 CANN RD

City: NEWARK | State: DE | Zip Code: 19702

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 92731.94

Date: 07/22/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
525.00	1975.00	2500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
1562.15	5876.65	7438.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

Image# 202608209903334481

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162809** ☐ Memo Item

IRETON, PAULA, , ,

Mailing Address 127 CANN RD

City: NEWARK | State: DE | Zip Code: 19702

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 95231.94

Date: 07/22/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
525.00	1975.00	2500.00

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162794** ☐ Memo Item

LAMB, JAMIE, , ,

Mailing Address 4 YORK WAY

City: HOCKESSIN | State: DE | Zip Code: 19707

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 96929.08

Date: 07/14/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
356.40	1340.74	1697.14

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162808** ☐ Memo Item

LAMB, JAMIE, , ,

Mailing Address 4 YORK WAY

City: HOCKESSIN | State: DE | Zip Code: 19707

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 101929.08

Date: 07/14/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
1050.00	3950.00	5000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
1931.40	7265.74	9197.14

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

Image# 202608209903334482

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1165840** ☐ Memo Item

MICROSOFT SERVICES

Mailing Address ONE MICROSOFT WAY

City	State	Zip Code
REDMOND	WA	98052

Purpose of Disbursement: SOFTWARE SUBSCRIPTION

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 101981.60

Date: 07/27/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
11.03	41.49	52.52

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1163066** ☐ Memo Item

MICROSOFT SERVICES

Mailing Address ONE MICROSOFT WAY

City	State	Zip Code
REDMOND	WA	98052

Purpose of Disbursement: SOFTWARE SUBSCRIPTION

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 102065.60

Date: 07/13/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
17.64	66.36	84.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162839** ☐ Memo Item

MOORE, MATTIE, , ,

Mailing Address 1 WOOD ROAD

City	State	Zip Code
WILMINGTON	DE	19806

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 103565.60

Date: 07/15/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
315.00	1185.00	1500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
343.67	1292.85	1636.52

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

Image# 202608209903334483

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1166854** ☐ Memo Item

USPS

Mailing Address 147 QUIGLEY BLVD

City: NEW CASTLE | State: DE | Zip Code: 19720

Purpose of Disbursement: POSTAGE

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 103740.97

Date: 07/16/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
36.83	138.54	175.37

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1165841** ☐ Memo Item

USPS

Mailing Address 147 QUIGLEY BLVD

City: NEW CASTLE | State: DE | Zip Code: 19720

Purpose of Disbursement: POSTAGE

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 103743.10

Date: 07/27/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
0.45	1.68	2.13

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1166178** ☐ Memo Item

USPS

Mailing Address 147 QUIGLEY BLVD

City: NEW CASTLE | State: DE | Zip Code: 19720

Purpose of Disbursement: POSTAGE

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 103745.23

Date: 07/29/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
0.45	1.68	2.13

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
37.73	141.90	179.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

Image# 202608209903334484

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1163067** ☐ Memo Item

USPS

Mailing Address 147 QUIGLEY BLVD

City: NEW CASTLE | State: DE | Zip Code: 19720

Purpose of Disbursement: POSTAGE

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 103767.34

Date: 07/14/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
4.64	17.47	22.11

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1163070** ☐ Memo Item

USPS

Mailing Address 147 QUIGLEY BLVD

City: NEW CASTLE | State: DE | Zip Code: 19720

Purpose of Disbursement: POSTAGE

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 104157.34

Date: 07/15/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
81.90	308.10	390.00

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1165067** ☐ Memo Item

USPS

Mailing Address 147 QUIGLEY BLVD

City: NEW CASTLE | State: DE | Zip Code: 19720

Purpose of Disbursement: POSTAGE

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 104162.18

Date: 07/23/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
1.02	3.82	4.84

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
87.56	329.39	416.95

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

Image# 202608209903334485

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN STATE COMMITTEE OF DELAWARE

A. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1164444** ☐ Memo Item

USPS

Mailing Address 147 QUIGLEY BLVD

City: NEW CASTLE | State: DE | Zip Code: 19720

Purpose of Disbursement: POSTAGE

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 104168.57

Date: 07/21/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
1.34	5.05	6.39

B. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1163063** ☐ Memo Item

USPS

Mailing Address 147 QUIGLEY BLVD

City: NEW CASTLE | State: DE | Zip Code: 19720

Purpose of Disbursement: POSTAGE

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 104232.89

Date: 07/08/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
13.51	50.81	64.32

C. Full Name (Last, First, Middle Initial) **Transaction ID : H4.1162803** ☐ Memo Item

WELDIN, GARRETT, , ,

Mailing Address PO BOX 671

City: WILMINGTON | State: DE | Zip Code: 19899

Purpose of Disbursement: NON FEA PAYROLL

Activity or Event Identifier: ADMINISTRATIVE

Category/ Type:

Allocated Activity or Event: ☒ Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date: 106632.89

Date: 07/13/2026

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
504.00	1896.00	2400.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+ NONFEDERAL SHARE	= TOTAL AMOUNT
518.85	1951.86	2470.71

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
5486.21	20638.53	26124.74