

**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

FIGHT FOR VIRGINIA'S FUTURE

ADDRESS (number and street)

2350 KERNER BLVD., SUITE 250

Check if different
than previously
reported. (ACC)

SAN RAFAEL

CA

94901

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00904623

3. IS THIS
REPORTNEW
(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)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



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 M /

D D D /

Y Y 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 M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

01

01

2025

06

30

2025

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

LAZARUS, DAVID, , ,

Signature of Treasurer

LAZARUS, DAVID, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y

07

31

2025

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 3X**
Rev. 05/2016

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)

Page 3

Write or Type Committee Name

FIGHT FOR VIRGINIA'S FUTURE

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
01 01 2025

To:

M M / D D / Y Y Y Y Y
06 30 2025**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).....

50000.00

50000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

50000.00

50000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

1800000.00

1800000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5)

1850000.00

1850000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

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

0.00

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

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

1850000.00

1850000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

1850000.00

1850000.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	84125.99	84125.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	84125.99	84125.99
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)	1686317.90	1686317.90
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	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 28(a), (b), and (c)).....	0.00	0.00
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	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1770443.89	1770443.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1770443.89	1770443.89

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	1850000.00	1850000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1850000.00	1850000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	84125.99	84125.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	84125.99	84125.99

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 28
(check only one)
☒ 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)

FIGHT FOR VIRGINIA'S FUTURE

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

A. KAPANI, RICK, , ,Mailing Address 20201 EAST COUNTRY CLUB DRIVE
UNIT 1907City
AVENTURAState
FLZip Code
33180FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
APPTIUMOccupation (for Individual)
GENERAL MANAGER & SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2025

Transaction ID : IA3

Amount of Each Receipt this Period

50000.00

☐ Memo Item

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

B.

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 Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

C.

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 Y Y

Amount of Each Receipt this Period

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

50000.00

50000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 28
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

FIGHT FOR VIRGINIA'S FUTURE

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

A. CONNOLLY FOR CONGRESS

Mailing Address PO BOX 563

City
MERRIFIELDState
VAZip Code
22116FEC ID number of contributing
federal political committee.**C** C00445452

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2025

Transaction ID : IA11

Amount of Each Receipt this Period

1800000.00

☐ Memo Item

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

B.

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 Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

C.

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 Y Y

Amount of Each Receipt this Period

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

1800000.00

1800000.00

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

PAGE 8 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FIGHT FOR VIRGINIA'S FUTURE

Full Name (Last, First, Middle Initial)

A. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City
SACRAMENTOState
CAZip Code
95814

Purpose of Disbursement

LEGAL SERVICES AND PAC ADMINISTRATION

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB7

Amount of Each Disbursement this Period

6481.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City
SACRAMENTOState
CAZip Code
95814

Purpose of Disbursement

LEGAL SERVICES AND PAC ADMINISTRATION

Candidate Name

001

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB12

Amount of Each Disbursement this Period

2406.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LAKE RESEARCH PARTNERS INC

Mailing Address 1101 17TH STREET NW, STE 301

City
WashingtonState
DCZip Code
20036

Purpose of Disbursement

TELEPHONE SURVEY

Candidate Name

005

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : EB17

Amount of Each Disbursement this Period

55300.40

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

64187.99

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

PAGE 9 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

FIGHT FOR VIRGINIA'S FUTURE

Full Name (Last, First, Middle Initial)

A. STONE OAK STRATEGIES LLC

Mailing Address 1235 CHERRY STREET

City
DenverState
COZip Code
80220Purpose of Disbursement
RESEARCH CONSULTING

004

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 12 / 2025

FEC Identification Number

C

Transaction ID : EB24

Amount of Each Disbursement this Period

8000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Mailing Address 1415 L STREET, SUITE 1200

City
SACRAMENTOState
CAZip Code
95814Purpose of Disbursement
LEGAL SERVICES AND PAC ADMINISTRATION

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 20 / 2025

FEC Identification Number

C

Transaction ID : EB39

Amount of Each Disbursement this Period

11938.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

19938.00

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

84125.99

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

PAGE 10 OF 28

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

NAME OF COMMITTEE (In Full)

FIGHT FOR VIRGINIA'S FUTURE

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

NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP

Nature of Debt (Purpose):

LEGAL SERVICES AND PAC
ADMINISTRATION

Mailing Address 1415 L STREET, SUITE 1200

City
SACRAMENTOState
CAZip Code
95814

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD77

Amount Incurred This Period

10221.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10221.00

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

THE SEXTON GROUP

Nature of Debt (Purpose):

MULTIMEDIA MESSAGING SERVICE (TEXT
MESSAGES, ROBOCALLS, LIVE CALLS)

Mailing Address 440 N WELLS ST, STE 200

City
CHICAGOState
ILZip Code
60654

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD60

Amount Incurred This Period

12994.48

Payment This Period

0.00

Outstanding Balance at Close of This Period

12994.48

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

THE SEXTON GROUP

Nature of Debt (Purpose):

LIVE CALLS

Mailing Address 440 N WELLS ST, STE 200

City
CHICAGOState
ILZip Code
60654

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD71

Amount Incurred This Period

5985.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5985.00

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

29200.48

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

29200.48

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

0.00

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

29200.48

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 11 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>				
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 05 / 09 / 2025	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6000.00</div>	
City Washington	State DC	Zip Code 20008	Transaction ID : BE1 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 05 / 12 / 2025	
Purpose of Expenditure DIGITAL MEDIA ADS			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 11 State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">50986.95</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 05 / 09 / 2025	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1332.00</div>	
City Washington	State DC	Zip Code 20008	Transaction ID : XEALC1 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 05 / 13 / 2025	
Purpose of Expenditure PRODUCTION FOR DIGITAL MEDIA ADS			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 11 State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">50986.95</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
<div style="display: flex; justify-content: space-between;"><div>(a) SUBTOTAL of Itemized Independent Expenditures</div><div style="border: 1px solid black; padding: 2px; display: inline-block;">7332.00</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>(c) TOTAL Independent Expenditures</div><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div>				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 12 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>				
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 05 / 13 / 2025	
Mailing Address 1920 L STREET, NW, STE 700			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">36971.67</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE2 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 04 / 2025	
Purpose of Expenditure MAILER		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">50986.95</div>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ District: 11 State: VA		
Full Name of Payee THE SEXTON GROUP <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 05 / 13 / 2025	
Mailing Address 440 N WELLS ST, STE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">683.28</div>	
City CHICAGO	State IL	Zip Code 60654	Transaction ID : BE5 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 16 / 2025	
Purpose of Expenditure ROBOCALLS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">50986.95</div>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶ District: 11 State: VA		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2026 <input type="checkbox"/> Other (specify) ▶				
<div style="display: flex; justify-content: space-between;"><div>(a) SUBTOTAL of Itemized Independent Expenditures</div><div style="border: 1px solid black; padding: 2px; display: inline-block;">37654.95</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>(c) TOTAL Independent Expenditures</div><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div>				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 13 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>				
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 05 / 15 / 2025	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">6000.00</div>	
City Washington		State DC	Zip Code 20008	
Purpose of Expenditure DIGITAL MEDIA ADS			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 11 State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">50986.95</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 10 / 2025	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">200000.00</div>	
City Washington		State DC	Zip Code 20008	
Purpose of Expenditure DIGITAL MEDIA AND TELEVISION ADS			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 11 State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ SPECIAL	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">206000.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 14 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>				
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 10 / 2025	
Mailing Address 1920 L STREET, NW, STE 700			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">66941.65</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : XEALC4 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 11 / 2025	
Purpose of Expenditure MAILER		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ SPECIAL	
Full Name of Payee THE SEXTON GROUP <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 12 / 2025	
Mailing Address 440 N WELLS ST, STE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">17000.00</div>	
City CHICAGO	State IL	Zip Code 60654	Transaction ID : XEALC7 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 16 / 2025	
Purpose of Expenditure LIVE CALLS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ SPECIAL	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">83941.65</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 15 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>				
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 06 / 13 / 2025	
Mailing Address 1920 L STREET, NW, STE 700			Amount <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">66941.65</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : XEALC5 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 06 / 11 / 2025	
Purpose of Expenditure MAILER		Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>	Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>11</u> State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ SPECIAL	
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 06 / 16 / 2025	
Mailing Address 1920 L STREET, NW, STE 700			Amount <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">59969.84</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE6 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 06 / 23 / 2025	
Purpose of Expenditure MAILER		Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>	Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>11</u> State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border-bottom: 1px solid black; width: 100%; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ SPECIAL	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;">126911.49</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;"></div>	
(c) TOTAL Independent Expenditures			<div style="border-bottom: 1px solid black; width: 100%; text-align: right;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 16 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on <div style="display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y / / / / / /</div>			
Full Name of Payee GAMBIT STRATEGIES LLC <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>		Date of Public Distribution/Dissemination <div style="display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y 06 / 17 / 2025</div>	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">320922.04</div>	
City Washington	State DC		
Purpose of Expenditure DIGITAL MEDIA AND TELEVISION ADS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : XEALC6 Date of Disbursement or Obligation <div style="display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y 06 / 12 / 2025</div>
Name of Federal Candidate: WALKINSHAW, JAMES, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
Full Name of Payee GAMBIT STRATEGIES LLC <div style="text-align: right;"><input type="checkbox"/> Memo Item</div>		Date of Public Distribution/Dissemination <div style="display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y 06 / 17 / 2025</div>	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">69167.80</div>	
City Washington	State DC		
Purpose of Expenditure DIGITAL MEDIA AND RADIO ADS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Transaction ID : XEALC8 Date of Disbursement or Obligation <div style="display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y 06 / 17 / 2025</div>
Name of Federal Candidate: WALKINSHAW, JAMES, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
(a) SUBTOTAL of Itemized Independent Expenditures ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;">390089.84</div>			
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>			
(c) TOTAL Independent Expenditures ▶ <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>LAZARUS, DAVID, , ,</u>		Date <div style="display: inline-block; text-align: center;">M M / D D / Y Y Y Y Y Y 07 / 31 / 2025</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 17 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>				
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 17 / 2025	
Mailing Address 1920 L STREET, NW, STE 700			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">70772.50</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE7 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 23 / 2025	
Purpose of Expenditure MAILER		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ SPECIAL	
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 18 / 2025	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2734.50</div>	
City Washington	State DC	Zip Code 20008	Transaction ID : XEALC9 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 18 / 2025	
Purpose of Expenditure DIGITAL MEDIA AND RADIO ADS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ SPECIAL	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">73507.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature LAZARUS, DAVID, , ,			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 18 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>	
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 18 / 2025	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">269229.83</div>	
City Washington	State DC	Zip Code 20008	Transaction ID : XEALC10 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 18 / 2025
Purpose of Expenditure DIGITAL MEDIA AND TELEVISION ADS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: VA
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL	
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 18 / 2025	
Mailing Address 1920 L STREET, NW, STE 700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">59969.84</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE8 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 23 / 2025
Purpose of Expenditure MAILER		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate District: 11 State: VA
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">329199.67</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature LAZARUS, DAVID, , ,		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 19 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>				
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">3749.00</div>	
City Washington	State DC	Zip Code 20008	Transaction ID : XEALC11 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Purpose of Expenditure PRODUCTION FOR DIGITAL MEDIA ADS		Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>	<div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ► <u>SPECIAL</u>	
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Mailing Address 1920 L STREET, NW, STE 700			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">68473.99</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE9 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Purpose of Expenditure MAILER		Category/ Type <div style="border-bottom: 1px solid black; width: 40px; text-align: center;">004</div>	<div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ► <u>SPECIAL</u>	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">72222.99</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;"></div>	
(c) TOTAL Independent Expenditures			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 20 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>				
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">5635.00</div>	
City Washington	State DC	Zip Code 20008	Transaction ID : XEALC12 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Purpose of Expenditure GOTV MEDIA ADS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">415.00</div>	
City Washington	State DC	Zip Code 20008	Transaction ID : XEALC15 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Purpose of Expenditure PRODUCTION FOR GOTV MEDIA ADS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">6050.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
(c) TOTAL Independent Expenditures			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 22 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>				
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 24 / 2025	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">630.00</div>	
City Washington	State DC	Zip Code 20008	Transaction ID : XEALC13 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 24 / 2025	
Purpose of Expenditure PRODUCTION FOR DIGITAL MEDIA ADS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: PEKARSKY, STELLA, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL	
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 24 / 2025	
Mailing Address 1920 L STREET, NW, STE 700			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">59969.84</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE11 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 23 / 2025	
Purpose of Expenditure MAILER		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">60599.84</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature LAZARUS, DAVID, , ,			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 23 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div>				
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 06 / 24 / 2025	
Mailing Address 1920 L STREET, NW, STE 700			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">34290.02</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE17 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 06 / 25 / 2025	
Purpose of Expenditure MAILERS			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
Full Name of Payee GAMBIT STRATEGIES LLC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 06 / 25 / 2025	
Mailing Address 2939 VAN NESS STREET, NW, APT 1006			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">7500.00</div>	
City Washington	State DC	Zip Code 20008	Transaction ID : XEALC14 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 06 / 26 / 2025	
Purpose of Expenditure DIGITAL MEDIA ADS			Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">41790.02</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"></div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"></div>	
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Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 24 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>	
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 25 / 2025	
Mailing Address 1920 L STREET, NW, STE 700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">70772.50</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE12 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 23 / 2025
Purpose of Expenditure MAILER		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL	
Full Name of Payee MAMMEN GROUP, INC. <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 25 / 2025	
Mailing Address 1920 L STREET, NW, STE 700		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">41522.65</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE18 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 25 / 2025
Purpose of Expenditure MAILERS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">112295.15</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature LAZARUS, DAVID, , ,		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 25 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>				
Full Name of Payee THE SEXTON GROUP <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 25 / 2025	
Mailing Address 440 N WELLS ST, STE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2100.24</div>	
City CHICAGO	State IL	Zip Code 60654	Transaction ID : BE16 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 25 / 2025	
Purpose of Expenditure TEXT MESSAGES		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: WALKINSHAW, JAMES, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
Full Name of Payee THE SEXTON GROUP <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 25 / 2025	
Mailing Address 440 N WELLS ST, STE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2100.24</div>	
City CHICAGO	State IL	Zip Code 60654	Transaction ID : BE21 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 25 / 2025	
Purpose of Expenditure TEXT MESSAGES		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: PEKARSKY, STELLA, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div>				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 26 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report New report Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y</div>				
Full Name of Payee THE SEXTON GROUP			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y</div>	
Mailing Address 440 N WELLS ST, STE 200			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">500.00</div>	
City CHICAGO	State IL	Zip Code 60654	Transaction ID : BE25 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y</div>	
Purpose of Expenditure ROBOCALLS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y</div>	
Name of Federal Candidate: PEKARSKY, STELLA, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
Full Name of Payee MAMMEN GROUP, INC.			<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y</div>	
Mailing Address 1920 L STREET, NW, STE 700			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">66941.65</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : BE13 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y</div>	
Purpose of Expenditure MAILER		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	<div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y</div>	
Name of Federal Candidate: WALKINSHAW, JAMES, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ <u>SPECIAL</u>	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">66941.65</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;"></div>	
(c) TOTAL Independent Expenditures			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y</div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 27 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report ▶ New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div>				
Full Name of Payee THE SEXTON GROUP <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 26 / 2025	
Mailing Address 440 N WELLS ST, STE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">794.00</div>	
City CHICAGO	State IL	Zip Code 60654	Transaction ID : BE26 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 25 / 2025	
Purpose of Expenditure ROBOCALLS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ SPECIAL	
Full Name of Payee THE SEXTON GROUP <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 27 / 2025	
Mailing Address 440 N WELLS ST, STE 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">7500.00</div>	
City CHICAGO	State IL	Zip Code 60654	Transaction ID : BE27 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 06 / 25 / 2025	
Purpose of Expenditure LIVE CALLS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: WALKINSHAW, JAMES, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 11 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ▶ SPECIAL	
(a) SUBTOTAL of Itemized Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">M M / D D / Y Y Y Y Y Y</div> 07 / 31 / 2025	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 28 OF 28
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) FIGHT FOR VIRGINIA'S FUTURE			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00904623</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>	
Full Name of Payee THE SEXTON GROUP		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 28 / 2025
Mailing Address 440 N WELLS ST, STE 200		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5985.00</div>		Transaction ID : BE24 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 06 / 28 / 2025
City CHICAGO	State IL			
Purpose of Expenditure LIVE CALLS		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate: WALKINSHAW, JAMES, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>11</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1654310.43</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2025 <input checked="" type="checkbox"/> Other (specify) ► <u>SPECIAL</u>
Full Name of Payee		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div>
City	State			
Purpose of Expenditure		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;">(a) SUBTOTAL of Itemized Independent Expenditures</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(b) SUBTOTAL of Unitemized Independent Expenditures.....</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;"></div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 60%;">(c) TOTAL Independent Expenditures</div><div style="width: 35%; text-align: right;"><div style="border: 1px solid black; padding: 2px; display: inline-block;">1686317.90</div></div></div>				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>LAZARUS, DAVID, , ,</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY</div> 07 / 31 / 2025	