

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

WHEELER FOR CONGRESS

ADDRESS (number and street)

PO BOX 1046

Check if different  
than previously  
reported. (ACC)

BOERNE

TX

78006

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00917823

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

TX

21

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

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

CRATE, BRADLEY, T., MR.,

Signature of Treasurer

CRATE, BRADLEY, T., MR.,

Date

M M /

D D /

Y Y Y Y

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

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

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**WHEELER FOR CONGRESS**

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2025

To:

MM / DD / YYYY  
09 / 30 / 2025

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                             | 49125.86                | 49125.86                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 0.00                    | 0.00                               |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 49125.86                | 49125.86                           |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 609.49                  | 609.49                             |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 609.49                  | 609.49                             |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 201516.37               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 153000.00               |                                    |

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

WHEELER FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
07 / 01 / 2025

To:

MM / DD / YYYY  
09 / 30 / 2025**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

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

45710.31

45710.31

(ii) Unitemized .....

3415.55

3415.55

(iii) TOTAL of contributions  
from individuals ▶

49125.86

49125.86

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs) .....

0.00

0.00

(d) The Candidate .....

0.00

0.00

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

49125.86

49125.86

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

## 13. LOANS:

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

153000.00

153000.00

(b) All Other Loans.....

0.00

0.00

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

153000.00

153000.00

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

0.00

0.00

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

0.00

0.00

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

202125.86

202125.86

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 05/2016)

**II. DISBURSEMENTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....

609.49

609.49

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES .....

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans .....

0.00

0.00

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

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees .....

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees  
(such as PACs) .....

0.00

0.00

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

0.00

0.00

21. OTHER DISBURSEMENTS .....

0.00

0.00

22. **TOTAL DISBURSEMENTS**

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

609.49

609.49

**III. CASH SUMMARY**

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

0.00

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

202125.86

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

202125.86

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

609.49

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD  
(subtract Line 26 from Line 25).....

201516.37

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

PAGE 5 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FOX, MARY, ARNOLD, ,

**A.**

Mailing Address 105 RIVER VW

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161886631

Amount of Each Receipt this Period

1000.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

GROSSO, CHERYL, , ,

Mailing Address 701 OAK PARK DR

APT 6301

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161679509

Amount of Each Receipt this Period

300.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

HOBSON, JOHN, , ,

Mailing Address 389 RIVER CLIFF PLACE

City

SPRING BRANCH

State

TX

Zip Code

78070

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161678166

Amount of Each Receipt this Period

250.00



Memo Item

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

1550.00

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

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

PAGE 6 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HUMPHRIES, ARTHUR, , ,

**A.**

Mailing Address 102 RUSTY LN

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161678164

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

KARULAK, CHARLES, , ,

Mailing Address 104 WOODBERRY LANE

City

BOERNE

State

TX

Zip Code

78015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161675273

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

KINNEY, WALLY, , ,

Mailing Address 158 NAPA RDG

City

COMFORT

State

TX

Zip Code

78013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161674580

Amount of Each Receipt this Period

500.00

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

2500.00

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

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

PAGE 7 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LEE, DONNA, , ,

**A.**

Mailing Address 1542 LAKESIDE DR W

City

CANYON LAKE

State

TX

Zip Code

78133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161675631

Amount of Each Receipt this Period

250.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

LUCKEY, MICHAEL, , ,

Mailing Address 110 WALTERS RD

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161678168

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

LUCKEY, MICHAEL, , ,

Mailing Address 110 WALTERS RD

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☐ Primary ☐ General  
☒ Other (specify) ▼

PRIMARY-RUNOFF

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161679512

Amount of Each Receipt this Period

1500.00

☐ Memo ItemPRIMARY RUNOFF ELECTION, IF ONE OCCURS,  
OR THE GENERAL**SUBTOTAL** of Receipts This Page (optional)..... ▶

5250.00

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

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

PAGE 8 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MOORE, BRAD, , ,

**A.** Mailing Address 106 WILD HORSE DRCity  
BOERNEState  
TXZip Code  
78006FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2025        |

Transaction ID : SA11AI.161674579

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORGAN, DAVID, , , III

**B.** Mailing Address 8103 VANITY HILLCity  
SAN ANTONIOState  
TXZip Code  
78256FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2025        |

Transaction ID : SA11AI.161679495

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORGAN, DAVID, , , III

**C.** Mailing Address 8103 VANITY HILLCity  
SAN ANTONIOState  
TXZip Code  
78256FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☐ Primary ☐ General  
☒ Other (specify) ▼

PRIMARY-RUNOFF

Election Cycle-to-Date ▼

7000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2025        |

Transaction ID : SA11AI.161886575

Amount of Each Receipt this Period

3500.00

☐ Memo ItemPRIMARY RUNOFF ELECTION, IF ONE OCCURS,  
OR THE GENERAL**SUBTOTAL** of Receipts This Page (optional)..... ▶

8000.00

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

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

PAGE 9 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MOORE, KATHY, , ,

**A.**

Mailing Address 106 WILD HORSE DRIVE

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

471.43

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   |   | 2 | 5 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161989361

Amount of Each Receipt this Period

471.43

☐ Memo Item

IN-KIND: EVENT EXPENSE: CATERING

Full Name (Last, First, Middle Initial)

MORGAN, SARA, , ,

**B.**

Mailing Address 8103 VANITY HL

City

SAN ANTONIO

State

TX

Zip Code

78256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161678172

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCHIFFMAN, STEPHEN, , ,

**C.**

Mailing Address 118 SPRING HILL DR

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SBS CONSTRUCTION

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161679499

Amount of Each Receipt this Period

3000.00

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

6971.43

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

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

PAGE 10 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHIFFMAN, STEPHEN, , ,

**A.**

Mailing Address 118 SPRING HILL DR

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SBS CONSTRUCTION

Occupation

PRESIDENT

Receipt For: 2026

☐ Primary ☐ General  
☒ Other (specify) ▼

PRIMARY-RUNOFF

Election Cycle-to-Date ▼

9500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2025        |

Transaction ID : SA11AI.161679500

Amount of Each Receipt this Period

3500.00

☐ Memo ItemPRIMARY RUNOFF ELECTION, IF ONE OCCURS,  
OR THE GENERAL**B.**

Full Name (Last, First, Middle Initial)

SCHIFFMAN, STEPHEN, , ,

Mailing Address 118 SPRING HILL DR

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SBS CONSTRUCTION

Occupation

PRESIDENT

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2025        |

Transaction ID : SA11AI.161679503

Amount of Each Receipt this Period

3000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SNYDER, RANDALL, , ,

Mailing Address 211 WINDVIEW DR

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 09  |   | 30  |   | 2025        |

Transaction ID : SA11AI.161674582

Amount of Each Receipt this Period

300.00

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

6800.00

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

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

PAGE 11 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address 4250 FAIRFAX DR

STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

16042.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 4 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161122676

Amount of Each Receipt this Period

150.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 4250 FAIRFAX DR

STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

16042.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161427376

Amount of Each Receipt this Period

250.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.**C.**

Full Name (Last, First, Middle Initial)

CVRK, CHARLES, , ,

Mailing Address 284 HANNAH LN

City

BOERNE

State

TX

Zip Code

78006

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

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 3 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161427377

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED THROUGH WINRED

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

260.25

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

PAGE 12 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address 4250 FAIRFAX DR

STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

16042.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161464979

Amount of Each Receipt this Period

750.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED

Full Name (Last, First, Middle Initial)

BROCKWELL, CINDY, , ,

**B.**

Mailing Address 274 ENGLISH OAKS CIR

City

BOERNE

State

TX

Zip Code

78006

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

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161466109

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

RATH, DIANE, , ,

**C.**

Mailing Address 68 BRISTOL GRN

City

SAN ANTONIO

State

TX

Zip Code

78209

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

Name of Employer

Occupation

AACOG

EXECUTIVE

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 6 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161466110

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED THROUGH WINRED

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

780.76

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

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

PAGE 13 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address 4250 FAIRFAX DR

STE 600

City

ARLINGTON

State

VA

Zip Code

22203

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

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

16042.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161672194

Amount of Each Receipt this Period

146.06

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address 4250 FAIRFAX DR

STE 600

City

ARLINGTON

State

VA

Zip Code

22203

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

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

16042.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161672196

Amount of Each Receipt this Period

600.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.**C.**

Full Name (Last, First, Middle Initial)

RACINOWSKI, RONALD, , ,

Mailing Address 205 VILLAGE DR

City

BOERNE

State

TX

Zip Code

78006

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

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161672290

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED THROUGH WINRED

**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

520.51

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

PAGE 14 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**Full Name (Last, First, Middle Initial)  
WINREDMailing Address 4250 FAIRFAX DR  
STE 600City  
ARLINGTONState  
VAZip Code  
22203FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

16042.15

Date of Receipt

M M / D D / Y Y Y Y Y  
09 30 2025

Transaction ID : SA11AI.161672198

Amount of Each Receipt this Period

1470.45

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.Full Name (Last, First, Middle Initial)  
BOERNER, JEFFERY, , ,

Mailing Address 874 HARPER RD

City  
KERRVILLEState  
TXZip Code  
78028FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MBS LAND SURVEY

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 25 2025

Transaction ID : SA11AI.161672297

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)  
FRIAR, CARLIN, , ,

Mailing Address 213 W HIGHLAND DR

City  
BOERNEState  
TXZip Code  
78006FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

THE BANK AND TRUST

BANKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y  
09 26 2025

Transaction ID : SA11AI.161672292

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED THROUGH WINRED

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

760.25

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

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

PAGE 15 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SENA, RICHARD, , ,

**A.**

Mailing Address 115 GLADE DR

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

INSURANCE AGENT

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161672298

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

16042.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730321

Amount of Each Receipt this Period

8230.19

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

Full Name (Last, First, Middle Initial)

ARMENTA, BENJAMIN, , ,

**C.**

Mailing Address 25802 FOXRUN VISTA DR

City

KATY

State

TX

Zip Code

77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

OWNER

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730490

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED THROUGH WINRED

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

500.00

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

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

PAGE 16 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BRADY, KEITH, , ,

**A.**

Mailing Address 9 SPANISH PASS RD

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AGAVE DESIGN

Occupation

CONTRACTOR

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730489

Amount of Each Receipt this Period

500.00



Memo Item

EARMARKED THROUGH WINRED

**B.**

Full Name (Last, First, Middle Initial)

STEINBACH, JEAN, C, ,

Mailing Address 76 VANDERBILT RD

City

MANHASSET

State

NY

Zip Code

11030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730496

Amount of Each Receipt this Period

260.25



Memo Item

EARMARKED THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

CASHION, ELAINE, , ,

Mailing Address 23 HEIN RD

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730493

Amount of Each Receipt this Period

1041.02



Memo Item

EARMARKED THROUGH WINRED

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

1801.27

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

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

PAGE 17 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DILL, SCOTT, , ,

**A.**

Mailing Address 228 WINDING RIV

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THL

Occupation

LO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730494

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

DUDLEY, SCOTT, , ,

**B.**

Mailing Address 127 POLPIS RD

City

NANTUCKET

State

MA

Zip Code

02554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730483

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

GORSCHER, RYAN, , ,

**C.**

Mailing Address 5338 MERCEDES AVE

City

DALLAS

State

TX

Zip Code

75206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BAKER HOSTETLER LLP

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730504

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED THROUGH WINRED

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

1780.76

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

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

PAGE 18 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GOTSCHKE, ROBERT, , ,

**A.**

Mailing Address 7735 ROCKING HORSE LN

City

BOERNE

State

TX

Zip Code

78015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAN ANTONIO HOMES AND LAND REALTY

Occupation

RE BROKER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

208.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730503

Amount of Each Receipt this Period

208.20



Memo Item

EARMARKED THROUGH WINRED

**B.**

Full Name (Last, First, Middle Initial)

MARTIN, ELIZABETH, , ,

Mailing Address PO BOX 2123

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY RANCHER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730508

Amount of Each Receipt this Period

1041.02



Memo Item

EARMARKED THROUGH WINRED

**C.**

Full Name (Last, First, Middle Initial)

MATHEWS, TOMMY, , ,

Mailing Address 106 BUSBY RD

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WESTWARD

Occupation

GEOLOGIST

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730484

Amount of Each Receipt this Period

1041.02



Memo Item

EARMARKED THROUGH WINRED

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

2290.24

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

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

PAGE 19 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

NEIGHBOR, LINDA, , ,

**A.** Mailing Address 101 TIMBER VIEW DRCity  
BOERNEState  
TXZip Code  
78006FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730486

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

PARKS, BOB, , ,

**B.** Mailing Address 890 MOSS ROSE LNCity  
DRIFTWOODState  
TXZip Code  
78619FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730495

Amount of Each Receipt this Period

260.25

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

PHELAN, GERARD, , ,

**C.** Mailing Address 5175 BAYLEAF AVECity  
BOYNTON BEACHState  
FLZip Code  
33437FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILLTOP SECURITIES INCOccupation  
BOND SALESMAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730492

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED THROUGH WINRED

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

1551.27

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

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

PAGE 20 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RILEY, FREDERICK, , ,

**A.**

Mailing Address 2 SAMUEL HARRINGTON RD

City

WESTBOROUGH

State

MA

Zip Code

01581

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT EMPLOYED

Occupation

SALES

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 8 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730500

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

16042.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730323

Amount of Each Receipt this Period

3870.45

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED. SEE ITEMIZED IF REQUIRED.

Full Name (Last, First, Middle Initial)

CARLINO, EGIDIO, , ,

**C.**

Mailing Address 1 N OCEAN BLVD

City

BOCA RATON

State

FL

Zip Code

33432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730517

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED THROUGH WINRED

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

770.51

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

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

PAGE 21 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DIAK, WILLIAM, , ,

**A.**

Mailing Address 10 NAPLES ST

City

NORWALK

State

CT

Zip Code

06855

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SEAPOETOccupation  
BOND TRADER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730512

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

HEBERT, PAUL, , ,

**B.**

Mailing Address 5160 SAINT DAVIDS DR

City

VERO BEACH

State

FL

Zip Code

32967

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ENGELS VOELKEROccupation  
REALTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730515

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

JORDAN, THOMAS, , ,

**C.**

Mailing Address 5100 PINE LAKE DR

City

MYRTLE BEACH

State

SC

Zip Code

29577

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
HOSPITALITY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161730520

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED THROUGH WINRED

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

1541.02

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MEAGHER, DONALD, , ,

**A.**

Mailing Address 7971 STATE ROUTE 547

City

SUSQUEHANNA

State

PA

Zip Code

18847

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KHM

Occupation

SELF-EMPLOYED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2025

Transaction ID : SA11AI.161730511

Amount of Each Receipt this Period

1041.02

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

WHEELER, ANNA, , ,

**B.**

Mailing Address 7735 ROCKING HORSE LN

City

BOERNE

State

TX

Zip Code

78015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.51

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 29 2025

Transaction ID : SA11AI.161730521

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address 4250 FAIRFAX DR  
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

16042.15

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 30 2025

Transaction ID : SA11AI.161805311

Amount of Each Receipt this Period

575.00

☒ Memo Item

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

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

1561.53

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

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

PAGE 23 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SOPRANO, CHRIS, , ,

**A.**

Mailing Address 35 FOX RUN

City

CALDWELL

State

NJ

Zip Code

07006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHRIS SOPRANO LTD

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

520.51

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA11AI.161805317

Amount of Each Receipt this Period

520.51

☐ Memo Item

EARMARKED THROUGH WINRED

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

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

520.51

45710.31

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

PAGE 24 OF 30

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

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WHEELER, MIKE, , ,

**A.**

Mailing Address PO BOX 1046

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.**C** H6TX21319Name of Employer  
WHEELER PROPERTY GROUP LLCOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

153000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA13A.161886530

Amount of Each Receipt this Period

50000.00

☐ Memo Item

PRIMARY 2026 LOAN

PERSONAL FUNDS

**B.**

Full Name (Last, First, Middle Initial)

WHEELER, MIKE, , ,

Mailing Address PO BOX 1046

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.**C** H6TX21319Name of Employer  
WHEELER PROPERTY GROUP LLCOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

153000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA13A.161886535

Amount of Each Receipt this Period

50000.00

☐ Memo Item

PRIMARY 2026 LOAN

PERSONAL FUNDS

**C.**

Full Name (Last, First, Middle Initial)

WHEELER, MIKE, , ,

Mailing Address PO BOX 1046

City

BOERNE

State

TX

Zip Code

78006

FEC ID number of contributing  
federal political committee.**C** H6TX21319Name of Employer  
WHEELER PROPERTY GROUP LLCOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

153000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

Transaction ID : SA13A.161886536

Amount of Each Receipt this Period

53000.00

☐ Memo Item

PRIMARY 2026 LOAN

PERSONAL FUNDS

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

153000.00

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

153000.00

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

PAGE 25 OF 30

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MOORE, KATHY, , ,**

Mailing Address 106 WILD HORSE DR

City  
BOERNEState  
TXZip Code  
78006Purpose of Disbursement  
IN-KIND: EVENT EXPENSE: CATERING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

471.43

Transaction ID : SB17.1090225

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 0 | 4 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

6.15

Transaction ID : SB17.1083681

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 8 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

10.25

Transaction ID : SB17.1085426

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

487.83

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

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

PAGE 26 OF 30

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a                                    | 20b                         | 20c                          | 21                           |

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NAME OF COMMITTEE (In Full)

**WHEELER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 1 | 9 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

30.76

Transaction ID : SB17.1086028

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 5 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

5.99

Transaction ID : SB17.1087177

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 9 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

**C**

Amount of Each Disbursement this Period

24.61

Transaction ID : SB17.1087178

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

61.36

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

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

PAGE 27 OF 30

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a           | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21  |

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NAME OF COMMITTEE (In Full)

WHEELER FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**Mailing Address 1776 WILSON BLVD  
SUITE 530City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 3 | 0 |   | 2 | 0 | 2 | 5 |

FEC Identification Number

C

Amount of Each Disbursement this Period

60.30

Transaction ID : SB17.1087179

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

60.30

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

609.49

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

PAGE 28 OF 30

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4106

WHEELER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

WHEELER, MIKE, , ,

Mailing Address

PO BOX 1046

City

BOERNE

State

TX

ZIP Code

78006

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 30 / 2025M M / D D / Y Y Y Y  
NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

50000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 29 OF 30

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4107

WHEELER FOR CONGRESS

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

☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

WHEELER, MIKE, , ,

Mailing Address

PO BOX 1046

City

BOERNE

State

TX

ZIP Code

78006

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 30 / 2025M M / D D / Y Y Y Y  
NONEM M / D D / Y Y Y Y  
NONEM M / D D / Y Y Y Y  
NONE

0.00

% (apr)

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

SUBTOTALS This Period This Page (optional).....▶

50000.00

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

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

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

PAGE 30 OF 30

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4108

WHEELER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

WHEELER, MIKE, , ,

Mailing Address

PO BOX 1046

City

BOERNE

State

TX

ZIP Code

78006

☒ Personal Funds of the Candidate

Original Amount of Loan

53000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

53000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
09 30 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

53000.00

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

153000.00

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