

**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

GOSAR FOR CONGRESS

ADDRESS (number and street)

3104 EAST CAMELBACK ROAD

STE 2889

PHOENIX

AZ

85016

☐ Check if different  
than previously  
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00461806

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

STATE ▼ DISTRICT

AZ

09

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

2023

through

M M /

D D /

Y Y Y Y

2023

*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

MECUM, BRETT, , ,

Signature of Treasurer

MECUM, BRETT, , ,

Date

M M /

D D /

Y Y Y Y

09

16

2023

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

**GOSAR FOR CONGRESS**

Report Covering the Period:

From:

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

To:

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

|                                                                                                                  | 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)) ....                                             | 58082.48                | 70722.98                           |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 100.00                  | 385.00                             |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 57982.48                | 70337.98                           |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 52665.06                | 78002.07                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 625.00                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 52665.06                | 77377.07                           |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 114908.18               |                                    |
| 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) ..... | 0.00                    |                                    |

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

GOSAR FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
01 / 01 / 2023

To:

MM / DD / YYYY  
03 / 31 / 2023**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).....

39776.01

44776.01

(ii) Unitemized .....

10906.47

18546.97

(iii) TOTAL of contributions  
from individuals ▶

50682.48

63322.98

(b) Political Party Committees.....

0.00

0.00

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

7400.00

7400.00

(d) The Candidate .....

0.00

0.00

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

58082.48

70722.98

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

0.00

0.00

## 13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

625.00

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

1951.98

1999.07

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

60034.46

73347.05

# **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.....

52665.06

78002.07

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 .....

100.00

385.00

(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)).....

100.00

385.00

21. OTHER DISBURSEMENTS .....

0.00

0.00

22. **TOTAL DISBURSEMENTS**

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

52765.06

78387.07

**III. CASH SUMMARY**

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

107638.78

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

60034.46

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

167673.24

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

52765.06

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

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

114908.18

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3A

Transaction ID :

TO CONTINUE PREVIOUS AMENDMENT

Form/Schedule:

Transaction ID:

**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 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BARDSWICH, LLOYD, JOSEPH, ,

**A.**

Mailing Address 6285 LAGO GRANDE DRIVE

City

FORT MOHAVE

State

AZ

Zip Code

86426

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L. J. BARDSWICH MINE CONSULTANT INC

Occupation

MINING EN

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 01  |   | 06  |   | 2023        |

Transaction ID : A-425149

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARK VIA WINRED ON 2023-01-17

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5257.01

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 01  |   | 17  |   | 2023        |

Transaction ID : A-425149CM

Amount of Each Receipt this Period

5257.01

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

BARDSWICH, LLOYD, JOSEPH, ,

Mailing Address 6285 LAGO GRANDE DRIVE

City

FORT MOHAVE

State

AZ

Zip Code

86426

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L. J. BARDSWICH MINE CONSULTANT INC

Occupation

MINING EN

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 03  |   | 17  |   | 2023        |

Transaction ID : A-450955

Amount of Each Receipt this Period

250.00

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

750.00

**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 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BASTING, DIRK, , ,

**A.**

Mailing Address 2200 SOUTH OCEAN LANE

City

FORT LAUDERDALE

State

FL

Zip Code

33316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 22  |   | 2023    |

Transaction ID : A-435681

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARK VIA HOUSE FREEDOM FUND ON 2023-02-22

**B.**

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.

C

C00552851

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18076.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 22  |   | 2023    |

Transaction ID : A-435681CM

Amount of Each Receipt this Period

600.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT CONTRIBUTION LIMIT NOT AFFECTED.

**C.**

Full Name (Last, First, Middle Initial)

BASTING, ROSEMARIE, , ,

Mailing Address 2200 SOUTH OCEAN LANE

City

FORT LAUDERDALE

State

FL

Zip Code

33316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 22  |   | 2023    |

Transaction ID : A-435682

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARK VIA HOUSE FREEDOM FUND ON 2023-02-22

**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 8 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

**A.**

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.**C** C00552851

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

18076.00

Date of Receipt

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

Transaction ID : A-435682CM

Amount of Each Receipt this Period

600.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

BRAYNARD, MATT, , ,

Mailing Address 1747 TYSONS CENTRAL ST

City

VIENNA

State

VA

Zip Code

22182

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

Name of Employer

Occupation

EXTERNAL AFFAIRS, INC.

CONSULTANT

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A-440770

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARK VIA WINRED ON 2023-03-26

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

14635.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 6 |   | 2 | 0 | 3 |   |

Transaction ID : A-440770CM

Amount of Each Receipt this Period

3513.61

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

1000.00

**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 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CARLSON, TYLER, , ,

**A.**

Mailing Address 7837 WEST BANFF LANE

City

PEORIA

State

AZ

Zip Code

85381

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MEC, INC.

Occupation

MANAGER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : A-435618

Amount of Each Receipt this Period

3000.00



Memo Item

Full Name (Last, First, Middle Initial)

COOLEY, WILLIAM, , ,

**B.**

Mailing Address 225 EDMOR ROAD

City

WEST PALM BEACH

State

FL

Zip Code

33405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : A-440736

Amount of Each Receipt this Period

3300.00



Memo Item

EARMARK VIA HOUSE FREEDOM FUND ON 2023-03-15

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

**C.**

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.

C

C00552851

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

21376.00

Date of Receipt

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

Transaction ID : A-440736CM

Amount of Each Receipt this Period

3300.00



Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT CONTRIBUTION LIMIT NOT AFFECTED.

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

6300.00

**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 10 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

COWLES, STEVEN, , ,

**A.**

Mailing Address 601 N FAIRFAX ST APT 317

City

ALEXANDRIA

State

VA

Zip Code

22314-2079

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COWLES PARKWAY FORD, INC

Occupation

OWNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-435650

Amount of Each Receipt this Period

2900.00

☐ Memo Item

EARMARK VIA HOUSE FREEDOM FUND ON 2023-01-22

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

**B.**

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.

C C00552851

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5800.00

Date of Receipt

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

Transaction ID : A-435650CM

Amount of Each Receipt this Period

5800.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

GARZA, MAURO, , ,

**C.**

Mailing Address 118 PALOMA DRIVE

City

SAN ANTONIO

State

TX

Zip Code

78212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MGM LLC

Occupation

CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-440745

Amount of Each Receipt this Period

500.00

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

3400.00

**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 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GRANTHAM, WILLIAM, , ,

**A.**

Mailing Address 200 W PORTLAND ST

City

PHOENIX

State

AZ

Zip Code

85003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HERCULEA HOLDINGS

Occupation

EXECUTIVE

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-440757

Amount of Each Receipt this Period

1500.00

☐ Memo Item

EARMARK VIA WINRED ON 2023-03-12

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11121.69

Date of Receipt

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

Transaction ID : A-440757CM

Amount of Each Receipt this Period

3074.71

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

GROSETA, P. ANDREW, , ,

Mailing Address 625 S MINGUS VIEW DR

City

COTTONWOOD

State

AZ

Zip Code

86326

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DBA: P. ANDREW GROSETA

Occupation

STORE OWNER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A-440831

Amount of Each Receipt this Period

1000.00

☐ 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 12 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HALEPOTA, MAQBOOL, , ,

**A.**

Mailing Address 6441 E. MCDONALD DRIVE

City

PARADISE VALLEY

State

AZ

Zip Code

85253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PALO VERDE CANCER CENTER SCOTTSDAL

Occupation

PHYSICIAN

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-440761

Amount of Each Receipt this Period

1500.00



Memo Item

EARMARK VIA WINRED ON 2023-03-12

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

11121.69

Date of Receipt

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

Transaction ID : A-440761CM

Amount of Each Receipt this Period

3074.71



Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

HERMSMEYER, JAN, , ,

Mailing Address 5350 E DEER VALLEY DR  
4397

City

PHOENIX

State

AZ

Zip Code

85054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A-445925

Amount of Each Receipt this Period

250.00



Memo Item

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

1750.00

**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 13 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

JACKSON, RAYNARD, , ,

**A.**

Mailing Address P.O. BOX 2404

City

WASHINGTON

State

DC

Zip Code

20013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RJA

Occupation

CEO

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

201.01

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-425195

Amount of Each Receipt this Period

201.01



Memo Item

EARMARK VIA WINRED ON 2023-01-17

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5257.01

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-425195CM

Amount of Each Receipt this Period

5257.01



Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

LACAVA, N, THOMAS, MR,

Mailing Address PO BOX 60503

City

WORCESTER

State

MA

Zip Code

01606-0503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DBA: N LACAVA

Occupation

MD

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : A-440722

Amount of Each Receipt this Period

300.00



Memo Item

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

501.01

**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 14 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

LANGFAN, MARK, , ,

**A.**

Mailing Address 2100 SOUTH OCEAN BLVD, 501N

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DBA: MARK LANGFAN

Occupation

ATTORNEY

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A-425203

Amount of Each Receipt this Period

1500.00



Memo Item

EARMARK VIA WINRED ON 2023-01-17

**B.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5257.01

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-425203CM

Amount of Each Receipt this Period

5257.01



Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**C.**

Full Name (Last, First, Middle Initial)

LANGNER, F RICHARD, , ,

Mailing Address 14130 E. COYOTE WAY

City

FOUNTAIN HILLS

State

AZ

Zip Code

85268

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CONCEPT DEVELOPMENT CORP

Occupation

PRESIDENT CEO

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A-440773

Amount of Each Receipt this Period

2500.00



Memo Item

EARMARK VIA WINRED ON 2023-03-26

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

4000.00

**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 15 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**Full Name (Last, First, Middle Initial)  
WINRED

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

14635.30

Date of Receipt

M M / D D / Y Y Y Y Y  
03 26 2023

Transaction ID : A-440773CM

Amount of Each Receipt this Period

3513.61

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
MOYES, KENNETH, , ,

Mailing Address 14986 WEST CHARTER OAK RD

City  
SURPRISEState  
AZZip Code  
85379FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 22 2023

Transaction ID : A-435619

Amount of Each Receipt this Period

1500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
OSBORN, SHANE, , ,

Mailing Address 919 CONGRESS AVE SUITE 1500

City  
AUSTINState  
TXZip Code  
78701FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

DBA: SHANE OSBORN

CEO

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 24 2023

Transaction ID : A-440777

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARK VIA WINRED ON 2023-03-31

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

2000.00

**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)

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|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15472.95

Date of Receipt

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

Transaction ID : A-440777CM

Amount of Each Receipt this Period

837.65

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

PARSONS, VERNON, , ,

Mailing Address 3104 AMANDA CIRCLE

City

KINGMAN

State

AZ

Zip Code

86401

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

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-425218

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARK VIA WINRED ON 2023-01-24

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

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

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7488.44

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-425218CM

Amount of Each Receipt this Period

2231.43

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00

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

PAGE 17 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RAIMEY, KIMBERLY, , ,

**A.**

Mailing Address 11211 LONGWATER CHASE CT

City

FORT MYERS

State

FL

Zip Code

33908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 0 | 6 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-425158

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARK VIA WINRED ON 2023-01-17

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5257.01

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-425158CM

Amount of Each Receipt this Period

5257.01

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

ROBINSON, STEVEN, , ,

**C.**Mailing Address 5373 US HWY 68  
STE D-700

City

GOLDEN VALLEY

State

AZ

Zip Code

86413

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF - EMPLOYED

Occupation

TAX PROFESSIONAL

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-440921

Amount of Each Receipt this Period

250.00

☐ Memo Item**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 18 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

RYDIN, MICHAEL, , ,

**A.**

Mailing Address 5500 HOLLY STREET

City

HOUSTON

State

TX

Zip Code

77081-7410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HCSS

Occupation

OWNER

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

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

Transaction ID : A-435651

Amount of Each Receipt this Period

2900.00



Memo Item

EARMARK VIA HOUSE FREEDOM FUND ON 2023-01-22

**B.**

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.

C

C00552851

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5800.00

Date of Receipt

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

Transaction ID : A-435651CM

Amount of Each Receipt this Period

5800.00



Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT CONTRIBUTION LIMIT NOT AFFECTED.

**C.**

Full Name (Last, First, Middle Initial)

SCHULTZ, ROD, , ,

Mailing Address 32507

N 221ST DR

City

WITTMANN

State

AZ

Zip Code

85361

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DBA: ROD SCHULTZ

Occupation

CONTRACTOR

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A-445928

Amount of Each Receipt this Period

250.00



Memo Item

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

3150.00

**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 19 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SHANER, PATRICK, , ,

**A.**

Mailing Address 806 LA PUERTA RD

City

BULLHEAD CITY

State

AZ

Zip Code

86442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-450946

Amount of Each Receipt this Period

250.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

SHANER, PATRICK, , ,

Mailing Address 806 LA PUERTA RD

City

BULLHEAD CITY

State

AZ

Zip Code

86442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-450947

Amount of Each Receipt this Period

250.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

SHANER, PATRICK, , ,

Mailing Address 806 LA PUERTA RD

City

BULLHEAD CITY

State

AZ

Zip Code

86442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

575.00

Date of Receipt

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

Transaction ID : A-450951

Amount of Each Receipt this Period

75.00



Memo Item

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

575.00

**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 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

TOPPER, LEWIS, , ,

**A.**

Mailing Address 212 TREASURE PLACE

City

JUPITER

State

FL

Zip Code

33469

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

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

Transaction ID : A-435672

Amount of Each Receipt this Period

2900.00

☐ Memo Item

EARMARK VIA HOUSE FREEDOM FUND ON 2023-01-30

**B.**

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.

C

C00552851

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

17400.00

Date of Receipt

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

Transaction ID : A-435672CM

Amount of Each Receipt this Period

5800.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT CONTRIBUTION LIMIT NOT AFFECTED.

**C.**

Full Name (Last, First, Middle Initial)

TOPPER, MARGARET, , ,

Mailing Address 212 TREASURE PLACE

City

JUPITER

State

FL

Zip Code

33469

FEC ID number of contributing  
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2900.00

Date of Receipt

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

Transaction ID : A-435671

Amount of Each Receipt this Period

2900.00

☐ Memo Item

EARMARK VIA HOUSE FREEDOM FUND ON 2023-01-30

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

5800.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 51

(check only one)

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

**A.**

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.**C** C00552851

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

17400.00

Date of Receipt

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

Transaction ID : A-435671CM

Amount of Each Receipt this Period

5800.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

UIHLEIN, RICHARD, , ,

Mailing Address PO BOX 52

City

LAKE BLUFF

State

IL

Zip Code

60044-0052

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

Name of Employer

Occupation

ULINE

CEO / OWNER

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5800.00

Date of Receipt

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

Transaction ID : A-435666

Amount of Each Receipt this Period

3300.00

☐ Memo ItemEARMARK VIA HOUSE FREEDOM FUND ON 2023-  
01-30**C.**

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.**C** C00552851

Name of Employer

Occupation

Receipt For: 2024



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

17400.00

Date of Receipt

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

Transaction ID : A-435666CM

Amount of Each Receipt this Period

2900.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

3300.00

**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 22 OF 51

|                                         |                              |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

UIHLEIN, RICHARD, , ,

**A.**

Mailing Address PO BOX 52

City

LAKE BLUFF

State

IL

Zip Code

60044-0052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ULINE

Occupation

CEO / OWNER

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5800.00

Date of Receipt

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

Transaction ID : A-435668

Amount of Each Receipt this Period

2500.00

☐ Memo Item

EARMARK VIA HOUSE FREEDOM FUND ON 2023-01-30

**B.**

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.

C

C00552851

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

17400.00

Date of Receipt

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

Transaction ID : A-435668CM

Amount of Each Receipt this Period

2900.00

☒ Memo Item

EARMARKED-CONDUIT DETAILS. CONDUIT CONTRIBUTION LIMIT NOT AFFECTED.

**C.**

Full Name (Last, First, Middle Initial)

WRIGHT, STEVEN, E, , DDS

Mailing Address PO BOX 953

City

SEDONA

State

AZ

Zip Code

86339-0953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DBA: STEVEN WRIGHT

Occupation

DENTIST

Receipt For: 2024

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A-440899

Amount of Each Receipt this Period

250.00

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

2750.00

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

39776.01

**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 51

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

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NAME OF COMMITTEE (In Full)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FREEDOM CLUB FEDERAL PAC

**A.**

Mailing Address P. O. BOX 416

City

CHAMPLIN

State

MN

Zip Code

55316

FEC ID number of contributing  
federal political committee.**C** C00307777

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 2 | 7 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-440902

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

**B.**

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.**C** C00552851

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

14500.00

Date of Receipt

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

Transaction ID : A-435667

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JIM JORDAN FOR CONGRESS

**C.**

Mailing Address 1709 STATE ROUTE 560 SOUTH

City

URBANA

State

OH

Zip Code

43078

FEC ID number of contributing  
federal political committee.**C** C00416594

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A-440739

Amount of Each Receipt this Period

2000.00

☐ Memo Item

EARMARK VIA HOUSE FREEDOM FUND ON 2023-03-29

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

3400.00

**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 24 OF 51

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

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NAME OF COMMITTEE (In Full)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

**A.**

Mailing Address PO BOX 1948

City

ALEXANDRIA

State

VA

Zip Code

22313

FEC ID number of contributing  
federal political committee.**C** C00552851

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

23376.00

Date of Receipt

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

Transaction ID : A-440739CM

Amount of Each Receipt this Period

2000.00

☒ Memo ItemEARMARKED-CONDUIT DETAILS. CONDUIT  
CONTRIBUTION LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

SAFARI CLUB INTERNATIONAL PAC (SCI-PAC)

Mailing Address 4800 W. GATES PASS ROAD

City

TUCSON

State

AZ

Zip Code

85745

FEC ID number of contributing  
federal political committee.**C** C00122101

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

Transaction ID : A-440832

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

WESTERN ENERGY ALLIANCE PAC

Mailing Address 1775 SHERMAN STREET  
SUITE 2700

City

DENVER

State

CO

Zip Code

80203

FEC ID number of contributing  
federal political committee.**C** C00426569

Name of Employer

Occupation

Receipt For: 2024



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : A-435656

Amount of Each Receipt this Period

1500.00

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

4000.00

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

7400.00

**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 25 OF 51

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

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NAME OF COMMITTEE (In Full)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ZIP MAILING SERVICE

**A.** Mailing Address 6304 SHERIFF ROAD

City

GREATER LANDOVER

State

MD

Zip Code

20785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1615.46

Date of Receipt

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

Transaction ID : A-440868

Amount of Each Receipt this Period

1615.46

☐ Memo Item

REFUND OF POSTAGE

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)..... ▶

1615.46

1615.46

**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 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN CAMPAIGN SERVICES**Mailing Address 1603 CAPITOL AVENUE  
STE 310 A475City  
CHEYENNEState  
WYZip Code  
82001Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1449.00

Transaction ID : B-435646

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN CAMPAIGN SERVICES**Mailing Address 1603 CAPITOL AVENUE  
STE 310 A475City  
CHEYENNEState  
WYZip Code  
82001Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

975.60

Transaction ID : B-435641

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN CAMPAIGN SERVICES**Mailing Address 1603 CAPITOL AVENUE  
STE 310 A475City  
CHEYENNEState  
WYZip Code  
82001Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

79.42

Transaction ID : B-435637

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

2504.02

**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 51

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN CAMPAIGN SERVICES**Mailing Address 1603 CAPITOL AVENUE  
STE 310 A475City  
CHEYENNEState  
WYZip Code  
82001Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

11.25

Transaction ID : B-435631

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN CAMPAIGN SERVICES**Mailing Address 1603 CAPITOL AVENUE  
STE 310 A475City  
CHEYENNEState  
WYZip Code  
82001Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 2 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8.45

Transaction ID : B-435626

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN CAMPAIGN SERVICES**Mailing Address 1603 CAPITOL AVENUE  
STE 310 A475City  
CHEYENNEState  
WYZip Code  
82001Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 3 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

22.50

Transaction ID : B-440835

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

42.20

**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 28 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN CAMPAIGN SERVICES**Mailing Address 1603 CAPITOL AVENUE  
STE 310 A475City  
CHEYENNEState  
WYZip Code  
82001Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 3 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.50

Transaction ID : B-440841

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN CAMPAIGN SERVICES**Mailing Address 1603 CAPITOL AVENUE  
STE 310 A475City  
CHEYENNEState  
WYZip Code  
82001Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

105.75

Transaction ID : B-440851

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANGELS BASEBALL**

Mailing Address 2000 EAST GENE AUTRY WAY

City  
ANAHEIMState  
CAZip Code  
92806Purpose of Disbursement  
TICKETS TO EVENT FOR SUPPORTERS

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

665.81

Transaction ID : B-440864

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

775.06

**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 29 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BERKELEY, JEFF, , ,**

Mailing Address 2301 DESERT FOREST LANE

City  
BULLHEAD CITYState  
AZZip Code  
86442Purpose of Disbursement  
EVENT ENTERTAINMENT

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 2 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : B-440737

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BILBRAY TAX SERVICE**Mailing Address 970 SEACOAST DRIVE  
STE 7City  
IMPERIAL BEACHState  
CAZip Code  
91932Purpose of Disbursement  
ACCOUNTING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1510.00

Transaction ID : B-425097

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BILBRAY TAX SERVICE**Mailing Address 970 SEACOAST DRIVE  
STE 7City  
IMPERIAL BEACHState  
CAZip Code  
91932Purpose of Disbursement  
ACCOUNTING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1510.00

Transaction ID : B-435599

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

3370.00

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

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

PAGE 30 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BILBRAY, BRIANA, , , CPA**Mailing Address 970 SEACOAST DRIVE  
SUITE 7City  
IMPERIAL BEACHState  
CAZip Code  
91932Purpose of Disbursement  
ACCOUNTING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 2 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B-440827

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BILBRAY, BRIANA, , , CPA**Mailing Address 970 SEACOAST DRIVE  
SUITE 7City  
IMPERIAL BEACHState  
CAZip Code  
91932Purpose of Disbursement  
ACCOUNTING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B-440863

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMELBACK FUNDRAISING, LLC**

Mailing Address P.O. BOX 2256

City  
SCOTTSDALEState  
AZZip Code  
85252Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 1 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-425096

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

3500.00

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

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

PAGE 31 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAMELBACK FUNDRAISING, LLC**

Mailing Address P.O. BOX 2256

City  
SCOTTSDALEState  
AZZip Code  
85252Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 0 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-435598

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMELBACK FUNDRAISING, LLC**

Mailing Address P.O. BOX 2256

City  
SCOTTSDALEState  
AZZip Code  
85252Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

686.25

Transaction ID : B-440830

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMELBACK FUNDRAISING, LLC**

Mailing Address P.O. BOX 2256

City  
SCOTTSDALEState  
AZZip Code  
85252Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 0 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-440731

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

1686.25

**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 32 OF 51

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAMELBACK FUNDRAISING, LLC**

Mailing Address P.O. BOX 2256

City  
SCOTTSDALEState  
AZZip Code  
85252Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 3 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

450.00

Transaction ID : B-440840

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FUNDRAISING FOOD AND BEVERAGES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1401.00

Transaction ID : B-435601

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FUNDRAISING FOOD AND BEVERAGES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 2 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1488.19

Transaction ID : B-440730

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

3339.19

**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 33 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FUNDRAISING FOOD AND BEVERAGES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

716.73

Transaction ID : B-440900

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CENTRAL SELF STORAGE**

Mailing Address 5333 SOUTH PRIEST ROAD

City  
TEMPEState  
AZZip Code  
85283Purpose of Disbursement  
STORAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

24.11

Transaction ID : B-435661

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CENTRAL SELF STORAGE**

Mailing Address 5333 SOUTH PRIEST ROAD

City  
TEMPEState  
AZZip Code  
85283Purpose of Disbursement  
STORAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

130.81

Transaction ID : B-440826

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

871.65

**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 34 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CENTRAL SELF STORAGE**

Mailing Address 5333 SOUTH PRIEST ROAD

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 01  |   | 2023    |

City  
TEMPEState  
AZZip Code  
85283

FEC Identification Number

**C**Purpose of Disbursement  
STORAGE

001

Amount of Each Disbursement this Period

130.81

Transaction ID : B-440861

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. CONGRESSIONAL INSTITUTE**

Mailing Address 1700 DIAGONAL ROAD. #730

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 13  |   | 2023    |

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

**C**Purpose of Disbursement  
CONFERENCE FEES

001

Amount of Each Disbursement this Period

1311.00

Transaction ID : B-435673

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. ECG DATA CENTER**Mailing Address 1420 SPRING HILL ROAD  
STE 490

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 17  |   | 2023    |

City  
MCLEANState  
VAZip Code  
22102

FEC Identification Number

**C**Purpose of Disbursement  
LIST MAINT.

003

Amount of Each Disbursement this Period

15.80

Transaction ID : B-435689

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

1457.61

**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 35 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ECG DATA CENTER**Mailing Address 1420 SPRING HILL ROAD  
STE 490City  
MCLEANState  
VAZip Code  
22102Purpose of Disbursement  
LIST MAINT.

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

72.33

Transaction ID : B-435690

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRONTIER AIRLINES**

Mailing Address 7001 TOWER RD

City  
DENVERState  
COZip Code  
80249Purpose of Disbursement  
AIRFARE

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

279.68

Transaction ID : B-440727

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FVC BANK**

Mailing Address 11325 RANDOM HILLS ROAD

City  
FAIRFAXState  
VAZip Code  
22030Purpose of Disbursement  
BANK FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 1 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

71.34

Transaction ID : B-435695

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

423.35

**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 36 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FVC BANK**

Mailing Address 11325 RANDOM HILLS ROAD

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 02  | 28  | 2023    |

City  
FAIRFAXState  
VAZip Code  
22030

FEC Identification Number

**C**Purpose of Disbursement  
BANK FEES

001

Amount of Each Disbursement this Period

47.13

Transaction ID : B-440867

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. FVC BANK**

Mailing Address 11325 RANDOM HILLS ROAD

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 03  | 01  | 2023    |

City  
FAIRFAXState  
VAZip Code  
22030

FEC Identification Number

**C**Purpose of Disbursement  
BANK FEES

001

Amount of Each Disbursement this Period

4.69

Transaction ID : B-440869

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. HOUSE FREEDOM FUND**

Mailing Address PO BOX 1948

Date of Disbursement

|     |     |         |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 01  | 30  | 2023    |

City  
ALEXANDRIAState  
VAZip Code  
22313

FEC Identification Number

**C**Purpose of Disbursement  
CONDUIT PROCESSING FEES

001

Amount of Each Disbursement this Period

400.00

Transaction ID : B-435665

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District: 00

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

451.82

**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 37 OF 51

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. INTEGRATED SOLUTIONS: POLITICAL**Mailing Address 4142 ADAMS AVENUE  
SUITE 103-550City  
SAN DIEGOState  
CAZip Code  
92116Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

700.00

Transaction ID : B-425095

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTEGRATED SOLUTIONS: POLITICAL**Mailing Address 4142 ADAMS AVENUE  
SUITE 103-550City  
SAN DIEGOState  
CAZip Code  
92116Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

700.00

Transaction ID : B-435597

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTEGRATED SOLUTIONS: POLITICAL**Mailing Address 4142 ADAMS AVENUE  
SUITE 103-550City  
SAN DIEGOState  
CAZip Code  
92116Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

700.00

Transaction ID : B-440729

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

2100.00

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

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

PAGE 38 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. INTREPID GLOBAL STRATEGIES, LLC**Mailing Address 3219 EAST CAMELBACK ROAD  
STE 343City  
PHOENIXState  
AZZip Code  
85018Purpose of Disbursement  
CAMPAIGN STRATEGY SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6500.00

Transaction ID : B-435658

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCSHANE LLC**Mailing Address 6950 O'BANNON DRIVE  
STE 100City  
LAS VEGASState  
NVZip Code  
89117Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : B-425099

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCSHANE LLC**Mailing Address 6950 O'BANNON DRIVE  
STE 100City  
LAS VEGASState  
NVZip Code  
89117Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 3 | 0 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B-435664

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

11500.00

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

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

PAGE 39 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MCSHANE LLC**Mailing Address 6950 O'BANNON DRIVE  
STE 100City  
LAS VEGASState  
NVZip Code  
89117Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 0 | 3 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : B-435600

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCSHANE LLC**Mailing Address 6950 O'BANNON DRIVE  
STE 100City  
LAS VEGASState  
NVZip Code  
89117Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B-435684

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCSHANE LLC**Mailing Address 6950 O'BANNON DRIVE  
STE 100City  
LAS VEGASState  
NVZip Code  
89117Purpose of Disbursement  
WEBSITE AND PHONE BURNER

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

200.17

Transaction ID : B-435685

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

2350.17

**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 40 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

**GOSAR FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MCSHANE LLC**Mailing Address 6950 O'BANNON DRIVE  
STE 100City  
LAS VEGASState  
NVZip Code  
89117Purpose of Disbursement  
TEXT MESSAGING CAMPAIGN AND VIDEO PRODUCTION

004

Category/  
Type

Candidate Name

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 2 | 8 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

4500.00

Transaction ID : B-440726

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MCSHANE LLC**Mailing Address 6950 O'BANNON DRIVE  
STE 100City  
LAS VEGASState  
NVZip Code  
89117Purpose of Disbursement  
TEXT MESSAGING CAMPAIGN AND VIDEO PRODUCTION

003

Category/  
Type

Candidate Name

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B-440732

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCSHANE LLC**Mailing Address 6950 O'BANNON DRIVE  
STE 100City  
LAS VEGASState  
NVZip Code  
89117Purpose of Disbursement  
FUNDRAISING EVENT EXPENSES

003

Category/  
Type

Candidate Name

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3256.48

Transaction ID : B-440733

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

9756.48

**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 41 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MDI IMAGING & MAIL**

Mailing Address 21955 CASCADES PARKWAY

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 17  |   | 2023    |

City  
DULLESState  
VAZip Code  
20166

FEC Identification Number

C

Purpose of Disbursement  
MAILHOUSE

003

Amount of Each Disbursement this Period

2625.17

Transaction ID : B-435691

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. MDI IMAGING & MAIL**

Mailing Address 21955 CASCADES PARKWAY

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 17  |   | 2023    |

City  
DULLESState  
VAZip Code  
20166

FEC Identification Number

C

Purpose of Disbursement  
PRINTING

003

Amount of Each Disbursement this Period

304.47

Transaction ID : B-435692

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SOUTHERN PINES STRATEGIES**

Mailing Address 1406 CHEROKEE TRAIL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 24  |   | 2023    |

City  
SANFORDState  
NCZip Code  
27332

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SERVICES

003

Amount of Each Disbursement this Period

975.60

Transaction ID : B-435642

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

3905.24

**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 42 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SOUTHERN PINES STRATEGIES**

Mailing Address 1406 CHEROKEE TRAIL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 01  |   | 31  |   | 2023    |

City  
SANFORDState  
NCZip Code  
27332

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

79.42

Transaction ID : B-435636

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. SOUTHERN PINES STRATEGIES**

Mailing Address 1406 CHEROKEE TRAIL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 14  |   | 2023    |

City  
SANFORDState  
NCZip Code  
27332

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

8.45

Transaction ID : B-435627

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SOUTHERN PINES STRATEGIES**

Mailing Address 1406 CHEROKEE TRAIL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 24  |   | 2023    |

City  
SANFORDState  
NCZip Code  
27332

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

11.25

Transaction ID : B-435632

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

99.12

**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 43 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SOUTHERN PINES STRATEGIES**

Mailing Address 1406 CHEROKEE TRAIL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 24  |   | 2023    |

City  
SANFORDState  
NCZip Code  
27332

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1449.00

Transaction ID : B-435647

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. SOUTHERN PINES STRATEGIES**

Mailing Address 1406 CHEROKEE TRAIL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 05  |   | 2023    |

City  
SANFORDState  
NCZip Code  
27332

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

22.50

Transaction ID : B-440836

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SOUTHERN PINES STRATEGIES**

Mailing Address 1406 CHEROKEE TRAIL

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 12  |   | 2023    |

City  
SANFORDState  
NCZip Code  
27332

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3.50

Transaction ID : B-440842

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

1475.00

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

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

PAGE 44 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SOUTHERN PINES STRATEGIES**

Mailing Address 1406 CHEROKEE TRAIL

City  
SANFORDState  
NCZip Code  
27332Purpose of Disbursement  
FUNDRAISING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

105.75

Transaction ID : B-440852

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City  
CHANTILLYState  
VAZip Code  
20151Purpose of Disbursement  
BOOKKEEPING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

201.14

Transaction ID : B-435693

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

City  
CHANTILLYState  
VAZip Code  
20151Purpose of Disbursement  
BOOKKEEPING SERVICES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

442.34

Transaction ID : B-435694

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

749.23

**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 45 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 06  |   | 2023    |

City  
CHANTILLYState  
VAZip Code  
20151

FEC Identification Number

C

Purpose of Disbursement  
BOOKKEEPING SERVICES

003

Amount of Each Disbursement this Period

67.67

Transaction ID : B-440865

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 06  |   | 2023    |

City  
CHANTILLYState  
VAZip Code  
20151

FEC Identification Number

C

Purpose of Disbursement  
BOOKKEEPING SERVICES

003

Amount of Each Disbursement this Period

555.34

Transaction ID : B-440866

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. WASHINGTON INTELLIGENCE BUREAU**

Mailing Address 4128 PEPSI PLACE

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 03  |   | 17  |   | 2023    |

City  
CHANTILLYState  
VAZip Code  
20151

FEC Identification Number

C

Purpose of Disbursement  
BOOKKEEPING SERVICES

003

Amount of Each Disbursement this Period

710.77

Transaction ID : B-440871

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

1333.78

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

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

PAGE 46 OF 51

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.56

Transaction ID : B-425269

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 1 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

207.19

Transaction ID : B-435645

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                          |         |
|-------------------------------------|-------------------|--------------------------|---------|
| <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 | 1 |   | 2 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

87.94

Transaction ID : B-435640

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

297.69

**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 47 OF 51

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 1 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

10.34

Transaction ID : B-435635

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 0 | 7 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.38

Transaction ID : B-435630

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 1 | 4 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3.32

Transaction ID : B-435625

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

15.04

**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 48 OF 51

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 2 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.94

Transaction ID : B-435622

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 2 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

180.77

Transaction ID : B-440829

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 0 | 5 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

25.08

Transaction ID : B-440834

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

207.79

**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 49 OF 51

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 1 | 2 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

121.13

Transaction ID : B-440839

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 1 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

6.99

Transaction ID : B-440845

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 2 | 6 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

138.44

Transaction ID : B-440859

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

266.56

**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 50 OF 51

|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BOULEVARD

City  
ARLINGTONState  
VAZip Code  
22209Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 3 |   | 3 | 1 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

33.02

Transaction ID : B-440850

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

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 | / | 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

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 | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

33.02

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

52510.27

**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 51 OF 51

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

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NAME OF COMMITTEE (In Full)

GOSAR FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SHARP, WILLIAM, , ,**

Mailing Address 2030 E BROADWAY RD APT1159

City  
TEMPEState  
AZZip Code  
85282Purpose of Disbursement  
REFUNDED CONTRIBUTION

010

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <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 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 3 |

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B-435648

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

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 | / | 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

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 | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

100.00

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

100.00