

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

Office Use Only

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

12FE4M5

GOPAC Election Fund

ADDRESS (number and street)

1000 WILSON BLVD

STE 2000

Check if different
than previously
reported. (ACC)

ARLINGTON

VA

22209

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00559740

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

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

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

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

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

04

01

2026

04

30

2026

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

JOHNSON, MELODIE, , ,

Signature of Treasurer

JOHNSON, MELODIE, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y

05

20

2026

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

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

GOPAC Election FundReport Covering the Period: From:

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

 To:

M M	/	D D	/	Y Y Y Y Y
04		30		2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		137662.03
(b) Cash on Hand at Beginning of Reporting Period.....	75249.29	
(c) Total Receipts (from Line 19)	1706000.00	5989210.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1781249.29	6126872.53
7. Total Disbursements (from Line 31)	1599677.28	5945300.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	181572.01	181572.01
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

GOPAC Election Fund

Report Covering the Period:

From:

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

To:

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11000.00	51000.00
(ii) Unitemized	0.00	15.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11000.00	51015.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	30000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	21000.00	81015.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1685000.00	5908195.50
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1706000.00	5989210.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1706000.00	5989210.50

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	69722.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	69722.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	14000.00
24. Independent Expenditures (use Schedule E)	247779.49	765471.50
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1351897.79	5096106.22
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1599677.28	5945300.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1599677.28	5945300.52

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	21000.00	81015.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21000.00	81015.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	69722.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	69722.80

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 19
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GOPAC Election Fund

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

A. 31 DAYS PAC

Mailing Address PO BOX 30844

City
BETHESDAState
MDZip Code
20824-0844FEC ID number of contributing
federal political committee.

C

C00786368

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11A.840167

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

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

B. COLAS, RAY, , ,Mailing Address 5100 DUPONT BOULEVARD
7G

City

FORT LAUDERDALE

State
FLZip Code
33308-4305FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYEDOccupation (for Individual)
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11A.840177

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

C. SMITH, BRADFORD L, , ,

Mailing Address 9965 LAKE WASHINGTON BOULEVARD NOR

City

BELLEVUE

State
WAZip Code
98004-6030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MICROSOFT CORPORATIONOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 23 / 2026

Transaction ID : SA11A.840204

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

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

11000.00

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

11000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 19
(check only one)

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

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

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

A. PFIZER INC. PAC

Mailing Address 66 HUDSON BLVD EAST

City
NEW YORKState
NYZip Code
10001-2189FEC ID number of contributing
federal political committee.**C**

C00016683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2026**Transaction ID : SA11C.840148**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

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

B. AFC VICTORY FUND

Mailing Address 421 OFFICE PARK DR

City
MOUNTAIN BRKState
ALZip Code
35223-2411FEC ID number of contributing
federal political committee.**C**

C00846683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2026**Transaction ID : SA11C.840191**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

CONTRIBUTION

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

C.

Mailing Address

City

State

Zip Code

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

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

☐ General

Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

10000.00

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

10000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

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

A. GOPAC INC

Mailing Address 1000 WILSON BLVD STE 2000

City
ARLINGTON

State
VA

Zip Code
22209

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11507640.48

Date of Receipt

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

Transaction ID : SA048512

Amount of Each Receipt this Period

1350000.00

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

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

B. JAKE ELLZEY FOR CONGRESS

Mailing Address 791 HWY 77 N
STE-C #258

City
WAXAHACHIE

State
TX

Zip Code
75165-1977

FEC ID number of contributing
federal political committee.

C C00770438

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

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

Transaction ID : SA11C.840168

Amount of Each Receipt this Period

45000.00

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

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

C. 31 DAYS PAC

Mailing Address PO BOX 30844

City
BETHESDA

State
MD

Zip Code
20824-0844

FEC ID number of contributing
federal political committee.

C C00786368

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

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

Transaction ID : SA11A.840153

Amount of Each Receipt this Period

25000.00

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

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

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

1420000.00

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

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

FOR LINE NUMBER: PAGE 9 OF 19

(check only one)

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

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

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

A. INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS

Mailing Address 1750 NEW YORK AVE SW

City
WASHINGTON

State
DC

Zip Code
20006-

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

04 / 13 / 2026

Transaction ID : SA11A.840180

Amount of Each Receipt this Period

50000.00

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

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

B. AFC VICTORY FUND

Mailing Address 421 OFFICE PARK DR

City
MOUNTAIN BRK

State
AL

Zip Code
35223-2411

FEC ID number of contributing
federal political committee.

C C00846683

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

145000.00

Date of Receipt

04 / 15 / 2026

Transaction ID : SA11C.87755

Amount of Each Receipt this Period

145000.00

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

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

C. CONSERVATIVES FOR AMERICA

Mailing Address PO BOX 30844

City
BETHESDA

State
MD

Zip Code
20824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

04 / 21 / 2026

Transaction ID : SA05544

Amount of Each Receipt this Period

25000.00

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

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

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

220000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 19
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☒ 17
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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

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

A. SMITH, BRADFORD L, , ,

Mailing Address 9965 LAKE WASHINGTON BOULEVARD NOR

City
BELLEVUEState
WAZip Code
98004-6030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MICROSOFT CORPORATIONOccupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

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

Transaction ID : SA11A.840208

Amount of Each Receipt this Period

45000.00

☐ Memo Item

NON CONTRIBUTION ACCOUNT RECEIPT

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

45000.00

1685000.00

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. ADVANCE MINNESOTA IE COMMITTEE

Mailing Address PO BOX 93

City
LAKE ELMOState
MNZip Code
55042Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.3

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EVERGREEN LEADERSHIP FUND

Mailing Address PO BOX 904

City
OLYMPIAState
WAZip Code
98507Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.4

Amount of Each Disbursement this Period

55000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOBS FIRST COALITION POLITICAL FUND

Mailing Address PO BOX 2071

City
BROOKFIELDState
WIZip Code
53008Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.5

Amount of Each Disbursement this Period

175000.00

☐ Memo Item

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

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

330000.00

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

PAGE 12 OF 19

☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. RENEW MINNESOTA

Mailing Address PO BOX 26471

City
MINNEAPOLISState
MNZip Code
55426Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.1

Amount of Each Disbursement this Period

200000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THE LEADERSHIP COUNCIL

Mailing Address PO BOX 12085

City
OLYMPIAState
WAZip Code
98508Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.6

Amount of Each Disbursement this Period

57500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIGHT BACK FUND

Mailing Address 5707 TRADEWIND DRIVE

City
PORTAGEState
MIZip Code
49024Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.9

Amount of Each Disbursement this Period

125000.00

☐ Memo Item

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

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

382500.00

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

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. PELICAN CAMPAIGNS

Mailing Address PO BOX 26326

City
AUSTINState
TXZip Code
78755

Purpose of Disbursement

NON-FED DISB - POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.10

Amount of Each Disbursement this Period

45000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FAIRBAIRN FREEDOM FUND

Mailing Address 201 TOWNSEND STSUITE 900

City
LANSINGState
MIZip Code
48933

Purpose of Disbursement

NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.23

Amount of Each Disbursement this Period

42000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CRAIG RIEDEL

Mailing Address 1246 HILTON HEAD CT

City
DEFIANCEState
OHZip Code
43512

Purpose of Disbursement

NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.17

Amount of Each Disbursement this Period

16615.67

☐ Memo Item

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

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

103615.67

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

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. GEORGIA REPUBLICAN SENATORIAL COMMITTEE INC.

Mailing Address 1175 N COLEMAN ROAD

City
ROSWELLState
GAZip Code
30075Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB.21**

Amount of Each Disbursement this Period

150000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KSL INC (KENTUCKIANS FOR STRONG LEADERSHIP)

Mailing Address 9300 SHELBYVILLE ROAD #1005

City
LOUISVILLEState
KYZip Code
40222Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB.22**

Amount of Each Disbursement this Period

250000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RYAN RIVERS FOR OHIO

Mailing Address 4679 WINTERSET DRIVE

City
COLUMBUSState
OHZip Code
43220Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB.16**

Amount of Each Disbursement this Period

16615.67

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

416615.67

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. SENATE REPUBLICAN CAMPAIGN COMMITTEE

Mailing Address PO BOX 12023

City
LANSINGState
MIZip Code
48901Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.20

Amount of Each Disbursement this Period

48875.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JAMES LOMAX FOR AL STATE HOUSE

Mailing Address 5608 ALTA DENA STREET

City
HUNTSVILLEState
ALZip Code
35802Purpose of Disbursement
NON-FED DISB - CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.28

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PELICAN CAMPAIGNS

Mailing Address PO BOX 26326

City
AUSTINState
TXZip Code
78755Purpose of Disbursement
NON-FED DISB - PRINTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB.30

Amount of Each Disbursement this Period

1689.05

☐ Memo Item

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

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

65564.05

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

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NAME OF COMMITTEE (In Full)

GOPAC Election Fund

Full Name (Last, First, Middle Initial)

A. SIMWINS

Mailing Address 1509 E 9TH AVENUE

City
TAMPAState
FLZip Code
33605

Purpose of Disbursement

NON-FED DISB - DIRECT MAIL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB.31**

Amount of Each Disbursement this Period

51300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City
MCLEANState
VAZip Code
22101

Purpose of Disbursement

NON-FED DISB - BANK CHARGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB.32**

Amount of Each Disbursement this Period

425.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT ONLINE

Mailing Address PO BOX 84314

City
BATON ROUGEState
LAZip Code
70884

Purpose of Disbursement

NON-FED DISB - CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C**Transaction ID : SB.33**

Amount of Each Disbursement this Period

1825.60

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

53550.60

1351845.99

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 17 OF 19
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) GOPAC Election Fund		FEC IDENTIFICATION NUMBER ▼ C C00559740	
Check if ☐ 24-hour report ☐ 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee 4D ACTION GROUP ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 17 / 2026	
Mailing Address 3316 N 7TH ST		Amount 14000.00	
City BROKEN ARROW	State OK	Zip Code 74014	Transaction ID : SE24.1041 Date of Disbursement or Obligation MM / DD / YYYY 04 / 17 / 2026
Purpose of Expenditure PRINTING/CANVASSING		Category/ Type	
Name of Federal Candidate: DAVID, KIM, , , ☒ Support ☐ Oppose		Office Sought: ☒ House ☐ Senate ☐ President District: 01 State: OK	
Calendar Year-To-Date Per Election for Office Sought 14000.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee INVICTUS ADVERTISING ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 20 / 2026	
Mailing Address 16192 COASTAL HIGHWAY		Amount 21924.00	
City LEWES	State DE	Zip Code 19958-3608	Transaction ID : SE24.1042 Date of Disbursement or Obligation MM / DD / YYYY 04 / 17 / 2026
Purpose of Expenditure DIRECT MAIL		Category/ Type	
Name of Federal Candidate: GAINES, HOUSTON, , , ☒ Support ☐ Oppose		Office Sought: ☒ House ☐ Senate ☐ President District: 10 State: GA	
Calendar Year-To-Date Per Election for Office Sought 21924.00		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		35924.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature JOHNSON, MELODIE, , ,		Date MM / DD / YYYY 04 / 18 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 18 OF 19
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) GOPAC Election Fund			FEC IDENTIFICATION NUMBER ▼ C C00559740	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee INVICTUS ADVERTISING ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 17 / 2026	
Mailing Address 16192 COASTAL HIGHWAY			Amount 32490.00	
City LEWES	State DE	Zip Code 19958-3608	Transaction ID : SE24.1039 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 17 / 2026	
Purpose of Expenditure DIRECT MAIL		Category/ Type	Name of Federal Candidate: PRIDEMORE, TRICIA, , , ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought 289960.00		Office Sought: ☒ House District: 11 ☐ President ☐ Senate State: GA		
			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee INVICTUS ADVERTISING ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 17 / 2026	
Mailing Address 16192 COASTAL HIGHWAY			Amount 160000.00	
City LEWES	State DE	Zip Code 19958-3608	Transaction ID : SE24.1040 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 17 / 2026	
Purpose of Expenditure DIGITAL MEDIA		Category/ Type	Name of Federal Candidate: PRIDEMORE, TRICIA, , , ☒ Support ☐ Oppose	
Calendar Year-To-Date Per Election for Office Sought 289960.00		Office Sought: ☒ House District: 11 ☐ President ☐ Senate State: GA		
			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			192490.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature JOHNSON, MELODIE, , ,			Date M M / D D / Y Y Y Y Y Y 04 / 18 / 2026	

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

NAME OF COMMITTEE (In Full) GOPAC Election Fund			FEC IDENTIFICATION NUMBER ▼ C C00559740	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee MAMMOTH MARKETING GROUP ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 22 / 2026	
Mailing Address 4500 BISSONNET STREET STE 370			Amount 19365.49	
City BELLAIRE	State TX	Zip Code 77401-3120	Transaction ID : SE24.1043 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 22 / 2026	
Purpose of Expenditure DIRECT MAIL		Category/ Type		
Name of Federal Candidate: ECHOLS, MICHAEL, CHARLES, ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: LA	
Calendar Year-To-Date Per Election for Office Sought		19365.49	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 			Amount 	
City 	State 	Zip Code 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure 		Category/ Type		
Name of Federal Candidate: 		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			19365.49	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures			247779.49	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
_____ JOHNSON, MELODIE, , , Signature			Date M M / D D / Y Y Y Y Y Y 04 / 23 / 2026	