

**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

DENNY FOR SENATE

ADDRESS (number and street)

PO BOX 490

Check if different
than previously
reported. (ACC)

POST FALLS

ID

83877

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00940833

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

ID

00

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

02

D D / Y Y Y Y

25

Y Y Y Y

2026

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

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

Curtis, Elizabeth, , ,

Signature of Treasurer

Curtis, Elizabeth, , ,

Date

M M / D D / Y Y Y Y

05

D D / Y Y Y Y

07

Y Y Y Y

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 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

DENNY FOR SENATE

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	6200.00	6200.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	6200.00	6200.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1605.50	1605.50
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1605.50	1605.50
8. Cash on Hand at Close of Reporting Period (from Line 27)	152594.50	
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)	169276.83	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

DENNY FOR SENATE

Report Covering the Period:

From:

MM / DD / YYYY
02 / 25 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026**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).....

6000.00

6000.00

(ii) Unitemized

200.00

200.00

(iii) TOTAL of contributions
from individuals ▶

6200.00

6200.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

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

6200.00

6200.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

148000.00

148000.00

(b) All Other Loans.....

0.00

0.00

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

148000.00

148000.00

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

0.00

0.00

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

0.00

0.00

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

154200.00

154200.00

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.....

1605.50

1605.50

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans

0.00

0.00

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

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

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

0.00

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

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

1605.50

1605.50

III. CASH SUMMARY

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

0.00

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

154200.00

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

154200.00

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

1605.50

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

152594.50

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3A

Transaction ID :

This report is amended to clarify that one of the candidate's contributions was, in fact, an advance, and should have been marked as a memo entry.

Form/Schedule:

Transaction ID:

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

PAGE 6 OF 15

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

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)

DENNY FOR SENATE

Full Name (Last, First, Middle Initial)

Bertoldo, Adam, , ,

A.

Mailing Address 6806 Selkirk St

City

Bonners Ferry

State

ID

Zip Code

83805

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Construction

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.4100

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LaVe, Louis, , ,

B.

Mailing Address PO Box J

City

Coeur D'Alene

State

ID

Zip Code

83816

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : SA11AI.4114

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Leingang, Kathy, , ,

C.

Mailing Address 20153 N Painted Cove Ln

City

Surprise

State

AZ

Zip Code

85387

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.4108

Amount of Each Receipt this Period

500.00

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

4000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 15

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

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NAME OF COMMITTEE (In Full)

DENNY FOR SENATE

Full Name (Last, First, Middle Initial)

Wilson, Barnes, , ,

A.

Mailing Address 2436 S Sunrise Ln

City

Post Falls

State

ID

Zip Code

83854

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 30 2026

Transaction ID : SA11AI.4102

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Wommack, Jay, , ,

B.

Mailing Address 32 Northridge Cir

City

Texarkana

State

TX

Zip Code

75503

FEC ID number of contributing
federal political committee.

C

Name of Employer

Infiniti Fleet Safety Training

Occupation

CEO

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2026

Transaction ID : SA11AI.4104

Amount of Each Receipt this Period

1000.00

☐ 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

☐ General

☐ Other (specify) ▼

Election Cycle-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)..... ▶

2000.00

6000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 15

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

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NAME OF COMMITTEE (In Full)

DENNY FOR SENATE

Full Name (Last, First, Middle Initial)

LAVE, DENNY, , ,

A.

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

FEC ID number of contributing
federal political committee.

C S6ID00161

Name of Employer
Self

Occupation
Candidate

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

149719.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2026

Transaction ID : SA11D.4123

Amount of Each Receipt this Period

1719.33

☒ Memo Item

Advance for: Email Platform

Full Name (Last, First, Middle Initial)

LAVE, DENNY, , ,

B.

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

FEC ID number of contributing
federal political committee.

C S6ID00161

Name of Employer
Self

Occupation
Candidate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

153581.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2026

Transaction ID : SA11D.4131

Amount of Each Receipt this Period

3862.50

☒ Memo Item

Advance for: Policy Preparation

Full Name (Last, First, Middle Initial)

LAVE, DENNY, , ,

C.

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

FEC ID number of contributing
federal political committee.

C S6ID00161

Name of Employer
Self

Occupation
Candidate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

157581.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2026

Transaction ID : SA11D.4133

Amount of Each Receipt this Period

4000.00

☒ Memo Item

Advance for: Print Advertising

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

0.00

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:
(check only one)

PAGE 9 OF 15

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

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NAME OF COMMITTEE (In Full)

DENNY FOR SENATE

Full Name (Last, First, Middle Initial)

LAVE, DENNY, , ,

A.

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

FEC ID number of contributing
federal political committee.

C S6ID00161

Name of Employer
Self

Occupation
Candidate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

162581.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2026

Transaction ID : SA11D.4137

Amount of Each Receipt this Period

5000.00

☒ Memo Item

Advance for: Legal Services

Full Name (Last, First, Middle Initial)

LAVE, DENNY, , ,

B.

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

FEC ID number of contributing
federal political committee.

C S6ID00161

Name of Employer
Self

Occupation
Candidate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

169276.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2026

Transaction ID : SA11D.4163

Amount of Each Receipt this Period

6695.00

☒ Memo Item

Advance for Polling & Research

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 ☐ General
☐ Other (specify) ▼

Election Cycle-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)..... ►

0.00

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

0.00

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

PAGE 10 OF 15

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

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NAME OF COMMITTEE (In Full)

DENNY FOR SENATE

Full Name (Last, First, Middle Initial)

LAVE, DENNY, , ,

A.

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

FEC ID number of contributing
federal political committee.**C** S6ID00161Name of Employer
SelfOccupation
Candidate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
03		02		2026

Transaction ID : SA13A.4120

Amount of Each Receipt this Period

100000.00

☐ Memo Item
 Personal Funds

Full Name (Last, First, Middle Initial)

LAVE, DENNY, , ,

B.

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

FEC ID number of contributing
federal political committee.**C** S6ID00161Name of Employer
SelfOccupation
Candidate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

148000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
03		04		2026

Transaction ID : SA13A.4121

Amount of Each Receipt this Period

48000.00

☐ Memo Item
 Personal Funds

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 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y

Amount of Each Receipt this Period

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

148000.00

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

148000.00

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

PAGE 11 OF 15

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

DENNY FOR SENATE

Full Name (Last, First, Middle Initial)

A. Elite Operations Group LLC

Mailing Address 990 Norbert St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		06		2026

City
Bridge CityState
TXZip Code
77611

FEC Identification Number

C

Purpose of Disbursement
Campaign Management Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

980.00

Transaction ID : SB17.4118

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. PAC Management Services LLCMailing Address 10521 Judicial Dr
Ste 200A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2026

City
FairfaxState
VAZip Code
22030

FEC Identification Number

C

Purpose of Disbursement
Compliance Services

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4116

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

1480.00

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

1480.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 12 OF 15

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4120

DENNY FOR SENATE

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

LAVE, DENNY, , ,

Mailing Address

PO BOX 490

City

POST FALLS

State

ID

ZIP Code

83877

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 02 / 2026

M M / D D / Y Y Y Y

On Demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

100000.00

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

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

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

PAGE 13 OF 15

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4121

DENNY FOR SENATE

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

LAVE, DENNY, , ,

Mailing Address

PO BOX 490

City

POST FALLS

State

ID

ZIP Code

83877

☒ Personal Funds of the Candidate

Original Amount of Loan

48000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

48000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 04 / 2026

M M / D D / Y Y Y Y

On Demand

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

48000.00

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

148000.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 15

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

DENNY FOR SENATE

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

LAVE, DENNY, , ,

Nature of Debt (Purpose):

Email Platform

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4122

Amount Incurred This Period

1719.33

Payment This Period

0.00

Outstanding Balance at Close of This Period

1719.33

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

LAVE, DENNY, , ,

Nature of Debt (Purpose):

Policy Preparation

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4130

Amount Incurred This Period

3862.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

3862.50

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

LAVE, DENNY, , ,

Nature of Debt (Purpose):

Print Advertising

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4132

Amount Incurred This Period

4000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

9581.83

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

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

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

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

PAGE 15 OF 15

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

NAME OF COMMITTEE (In Full)

DENNY FOR SENATE

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

LAVE, DENNY, , ,

Nature of Debt (Purpose):

Polling & Research

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4134

Amount Incurred This Period

6695.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6695.00

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

LAVE, DENNY, , ,

Nature of Debt (Purpose):

Legal Services

Mailing Address PO BOX 490

City

POST FALLS

State

ID

Zip Code

83877

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4136

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

11695.00

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

21276.83

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

148000.00

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

169276.83