

**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

COMMITTEE TO ELECT STOCKER FOR CONGRESS

ADDRESS (number and street)

2645 SHERIDAN DRIVE

Check if different
than previously
reported. (ACC)

TONAWANDA

NY

14150

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00907519

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NY

23

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
01 / 01 / 2026

through

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

Campbell, Kevin, , ,

Signature of Treasurer

Campbell, Kevin, , ,

Date

M M / D D / Y Y Y Y
04 / 15 / 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

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026

	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))....	1293.00	1293.00
(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))	1293.00	1293.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.00	0.00
(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))	0.00	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1293.00	
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)	35896.24	

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

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 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).....

104.00

104.00

(ii) Unitemized.....

1189.00

1189.00

(iii) TOTAL of contributions
from individuals ▶

1293.00

1293.00

(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))..

1293.00

1293.00

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

35896.24

35896.24

(b) All Other Loans.....

0.00

0.00

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

35896.24

35896.24

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)..... ▶

37189.24

37189.24

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.....	0.00	0.00
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	35896.24	35896.24
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	35896.24	35896.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	37189.24
25. SUBTOTAL (add Line 23 and Line 24).....	37189.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	35896.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1293.00

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

PAGE 5 OF 31

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

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Hohman, Dennis, G, ,

A.

Mailing Address 4056 N Freeman Road

City

Orchard Park

State

NY

Zip Code

14127

FEC ID number of contributing
federal political committee.

C

Name of Employer
unknownOccupation
unknown

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		09		2026

Transaction ID : SA11AI.4142

Amount of Each Receipt this Period

104.00

☐ Memo Item

Donation - Act Blue

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 ☐ 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

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)..... ▶

104.00

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

104.00

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 6 OF 31

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

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Desmond Nicholas

A.

Mailing Address 266 Troy Del Way

City

Williamsville

State

NY

Zip Code

14221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 10 / 2026

Transaction ID : SA13A.4272

Amount of Each Receipt this Period

2400.00



Memo Item

Full Name (Last, First, Middle Initial)

Desmond Nicholas

B.

Mailing Address 266 Troy Del Way

City

Williamsville

State

NY

Zip Code

14221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2026

Transaction ID : SA13A.4297

Amount of Each Receipt this Period

2400.00



Memo Item

Full Name (Last, First, Middle Initial)

enterprise

C.

Mailing Address Buffalo Intl. Airport
4200 Genesee St

City

Buffalo

State

NY

Zip Code

14225

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

584.86

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2026

Transaction ID : SA13A.4276

Amount of Each Receipt this Period

584.86



Memo Item

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

5384.86

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 7 OF 31

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

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)
FedEx

A. Mailing Address 1060 Niagara Falls Blvd

City State Zip Code
Tonawanda NY 14150

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation

Receipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

90.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 23 2026

Transaction ID : SA13A.4278

Amount of Each Receipt this Period

90.81

☐ Memo Item

Full Name (Last, First, Middle Initial)
FedEx

B. Mailing Address 1060 Niagara Falls Blvd.

City State Zip Code
Tonawawanda NY 14150

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation

Receipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

153.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 18 2026

Transaction ID : SA13A.4277

Amount of Each Receipt this Period

153.27

☐ Memo Item

Full Name (Last, First, Middle Initial)
Foxy Delivery

C. Mailing Address 256 Two Mile Creek Road

City State Zip Code
Tonawanda NY 14150

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation

Receipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

22.00

Date of Receipt

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

Transaction ID : SA13A.4279

Amount of Each Receipt this Period

22.00

☐ Memo Item

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

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

266.08

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)

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

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Foxy Delivery

A.

Mailing Address 256 Two Mile Creek Road

City

Tonawanda

State

NY

Zip Code

14150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

66.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 09 / 2026

Transaction ID : SA13A.4280

Amount of Each Receipt this Period

44.00



Memo Item

Full Name (Last, First, Middle Initial)

Foxy Delivery

B.

Mailing Address 256 Two Mile Creek Road

City

Tonawanda

State

NY

Zip Code

14150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

106.70

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 16 / 2026

Transaction ID : SA13A.4282

Amount of Each Receipt this Period

40.70



Memo Item

Full Name (Last, First, Middle Initial)

Gallagher Printing

C.

Mailing Address 9195 Main Strett

City

Clarence

State

NY

Zip Code

14031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1617.54

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 08 / 2026

Transaction ID : SA13A.4291

Amount of Each Receipt this Period

1617.54



Memo Item

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

1702.24

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 31

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

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Gallagher Printing

A.

Mailing Address 9195 Main Strett

City

Clarence

State

NY

Zip Code

14031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6873.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 15 / 2026

Transaction ID : SA13A.4290

Amount of Each Receipt this Period

5255.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gallagher Printing

B.

Mailing Address 9195 Main Strett

City

Clarence

State

NY

Zip Code

14031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7199.40

Date of Receipt

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

Transaction ID : SA13A.4292

Amount of Each Receipt this Period

325.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gallagher Printing

C.

Mailing Address 9195 Main Strett

City

Clarence

State

NY

Zip Code

14031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7415.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2026

Transaction ID : SA13A.4289

Amount of Each Receipt this Period

215.71

☐ Memo Item

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

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

5797.57

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 10 OF 31

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

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Gallagher Printing

A.

Mailing Address 9195 Main Strett

City

Clarence

State

NY

Zip Code

14031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

27468.75

Date of Receipt

M M / D D / Y Y Y Y Y
03 05 2026

Transaction ID : SA13A.4293

Amount of Each Receipt this Period

20053.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gallagher Printing

B.

Mailing Address 9195 Main Strett

City

Clarence

State

NY

Zip Code

14031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

27569.24

Date of Receipt

M M / D D / Y Y Y Y Y
03 09 2026

Transaction ID : SA13A.4288

Amount of Each Receipt this Period

100.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

Gallagher Printing

C.

Mailing Address 9195 Main Strett

City

Clarence

State

NY

Zip Code

14031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

27685.60

Date of Receipt

M M / D D / Y Y Y Y Y
03 13 2026

Transaction ID : SA13A.4287

Amount of Each Receipt this Period

116.36

☐ Memo Item

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

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

20270.49

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

PAGE 11 OF 31

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

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Olean Times Herald

A.

Mailing Address 639 Norton Drive

City
OleanState
NYZip Code
14760FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2475.00

Date of Receipt

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

Transaction ID : SA13A.4283

Amount of Each Receipt this Period

2475.00

☐ Memo Item

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 ☐ General
☐ Other (specify) ▼

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 ☐ General
☐ Other (specify) ▼

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)..... ▶

2475.00

35896.24

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

PAGE 12 OF 31

☐ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Desmond Nicholas

Mailing Address 266 Troy Del Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2026

City
WilliamsvilleState
NYZip Code
14221

FEC Identification Number

C C00907519Purpose of Disbursement
Social Media

004

Amount of Each Disbursement this Period

2400.00

Transaction ID : SB21.4211

☐ Memo Item

Candidate Name

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 23

Full Name (Last, First, Middle Initial)

B. Desmond Nicholas

Mailing Address 266 Troy Del Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2026

City
WilliamsvilleState
NYZip Code
14221

FEC Identification Number

C C00907519Purpose of Disbursement
Social Media

004

Amount of Each Disbursement this Period

2400.00

Transaction ID : SB21.4296

☐ Memo Item

Candidate Name

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 23

Full Name (Last, First, Middle Initial)

C. enterpriseMailing Address Buffalo Intl. Airport
4200 Genesee St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2026

City
BuffaloState
NYZip Code
14225

FEC Identification Number

C C00907519Purpose of Disbursement
Event

007

Amount of Each Disbursement this Period

584.86

Transaction ID : SB21.4196

☐ Memo Item

Candidate Name

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 23

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

5384.86

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

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

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☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FedEx

Mailing Address 1060 Niagara Falls Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2026

City
TonawandaState
NYZip Code
14150

FEC Identification Number

C C00907519Purpose of Disbursement
Magnet and poster

007

Amount of Each Disbursement this Period

153.27

Transaction ID : SB21.4198

☐ Memo ItemCandidate Name
COMMITTEE TO ELECT STOCKER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

Full Name (Last, First, Middle Initial)

B. Gallagher Printing

Mailing Address 9195 Main Strett

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2026

City
ClarenceState
NYZip Code
14031

FEC Identification Number

C C00907519Purpose of Disbursement
Printing

007

Amount of Each Disbursement this Period

5255.91

Transaction ID : SB21.4320

☐ Memo ItemCandidate Name
COMMITTEE TO ELECT STOCKER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

Full Name (Last, First, Middle Initial)

C. Gallagher Printing

Mailing Address 9195 Main Strett

Date of Disbursement

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

City
ClarenceState
NYZip Code
14031

FEC Identification Number

C C00907519Purpose of Disbursement
Printing - color copies

007

Amount of Each Disbursement this Period

325.95

Transaction ID : SB21.4321

☐ Memo ItemCandidate Name
COMMITTEE TO ELECT STOCKER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

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

5735.13

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Gallagher Printing

Mailing Address 9195 Main Strett

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2026

City
ClarenceState
NYZip Code
14031

FEC Identification Number

C C00907519Purpose of Disbursement
Printing - color flyers

007

Amount of Each Disbursement this Period

215.71

Transaction ID : SB21.4322

☐ Memo Item

Candidate Name

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 23

Full Name (Last, First, Middle Initial)

B. Gallagher Printing

Mailing Address 9195 Main Strett

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2026

City
ClarenceState
NYZip Code
14031

FEC Identification Number

C C00907519Purpose of Disbursement
Printing - letters, flyers, mailing

007

Amount of Each Disbursement this Period

20053.64

Transaction ID : SB21.4323

☐ Memo Item

Candidate Name

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 23

Full Name (Last, First, Middle Initial)

C. Gallagher Printing

Mailing Address 9195 Main Strett

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2026

City
ClarenceState
NYZip Code
14031

FEC Identification Number

C C00907519Purpose of Disbursement
Printing - palm cards

007

Amount of Each Disbursement this Period

100.49

Transaction ID : SB21.4324

☐ Memo Item

Candidate Name

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 23

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

20369.84

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☒ 21

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NAME OF COMMITTEE (In Full)

COMMITTEE TO ELECT STOCKER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Gallagher Printing

Mailing Address 9195 Main Strett

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2026

City
ClarenceState
NYZip Code
14031

FEC Identification Number

C C00907519Purpose of Disbursement
Printing - Thank you cards

007

Amount of Each Disbursement this Period

116.36

Transaction ID : SB21.4325

☐ Memo ItemCandidate Name
COMMITTEE TO ELECT STOCKER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

Full Name (Last, First, Middle Initial)

B. Gallagher Printing

Mailing Address 9195 Main Strett

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2026

City
ClarenceState
NYZip Code
14031

FEC Identification Number

C C00907519Purpose of Disbursement
P:rinting

007

Amount of Each Disbursement this Period

1617.54

Transaction ID : SB21.4326

☐ Memo ItemCandidate Name
COMMITTEE TO ELECT STOCKER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

Full Name (Last, First, Middle Initial)

C. Olean Times Herald

Mailing Address 639 Norton Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2026

City
OleanState
NYZip Code
14760

FEC Identification Number

C C00907519Purpose of Disbursement
Advertising

007

Amount of Each Disbursement this Period

2475.00

Transaction ID : SB21.4199

☐ Memo ItemCandidate Name
COMMITTEE TO ELECT STOCKER FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 23

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

4208.90

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

35698.73

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

PAGE 16 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4272

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Desmond Nicholas

Mailing Address

266 Troy Del Way

City

Williamsville

State

NY

ZIP Code

14221

☒ Personal Funds of the Candidate

Original Amount of Loan

2400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2400.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 10 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

2400.00

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 17 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4297

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Desmond Nicholas

Mailing Address

266 Troy Del Way

City

Williamsville

State

NY

ZIP Code

14221

☒ Personal Funds of the Candidate

Original Amount of Loan

2400.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2400.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 10 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

2400.00

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 18 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4276

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

enterprise

Mailing Address

Buffalo Intl. Airport
4200 Genesee St

City

Buffalo

State

NY

ZIP Code

14225

☒ Personal Funds of the Candidate

Original Amount of Loan

584.86

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

584.86

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 21 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

584.86

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 19 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4278

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

FedEx

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1060 Niagara Falls Blvd

City

Tonawanda

State

NY

ZIP Code

14150

☒ Personal Funds of the Candidate

Original Amount of Loan

90.81

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

90.81

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 23 / 2026M M / D D / Y Y Y Y
NoneY Y Y Y
None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

90.81

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 20 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4277

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

FedEx

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1060 Niagara Falls Blvd.

City

Tonawawanda

State

NY

ZIP Code

14150

☒ Personal Funds of the Candidate

Original Amount of Loan

153.27

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

153.27

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 18 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

153.27

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 21 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4279

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

☐ Memo Item

Election: 2026

Foxy Delivery

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

256 Two Mile Creek Road

City

Tonawanda

State

NY

ZIP Code

14150

☒ Personal Funds of the Candidate

Original Amount of Loan

22.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

22.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 02 / 2026M M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
NoneM M / D D / Y Y Y Y
None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

22.00

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 22 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4280

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

Foxy Delivery

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

256 Two Mile Creek Road

City

Tonawanda

State

NY

ZIP Code

14150

☒ Personal Funds of the Candidate

Original Amount of Loan

44.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

44.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 09 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

44.00

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 23 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4282

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Foxy Delivery

Mailing Address

256 Two Mile Creek Road

City

Tonawanda

State

NY

ZIP Code

14150

☒ Personal Funds of the Candidate

Original Amount of Loan

40.70

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

40.70

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 16 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

40.70

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 24 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4291

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Gallagher Printing

Mailing Address

9195 Main Strett

City

Clarence

State

NY

ZIP Code

14031

☒ Personal Funds of the Candidate

Original Amount of Loan

1617.54

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1617.54

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 08 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

1617.54

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 25 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4290

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Gallagher Printing

Mailing Address

9195 Main Strett

City

Clarence

State

NY

ZIP Code

14031

☒ Personal Funds of the Candidate

Original Amount of Loan

5255.91

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5255.91

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 15 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

5255.91

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 26 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4292

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Gallagher Printing

Mailing Address

9195 Main Strett

City

Clarence

State

NY

ZIP Code

14031

☒ Personal Funds of the Candidate

Original Amount of Loan

325.95

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

325.95

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

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

325.95

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 27 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4289

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Gallagher Printing

Mailing Address

9195 Main Strett

City

Clarence

State

NY

ZIP Code

14031

☒ Personal Funds of the Candidate

Original Amount of Loan

215.71

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

215.71

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 05 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

215.71

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 28 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4293

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Gallagher Printing

Mailing Address

9195 Main Strett

City

Clarence

State

NY

ZIP Code

14031

☒ Personal Funds of the Candidate

Original Amount of Loan

20053.64

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20053.64

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 05 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

20053.64

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 29 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4288

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Gallagher Printing

Mailing Address

9195 Main Strett

City

Clarence

State

NY

ZIP Code

14031

☒ Personal Funds of the Candidate

Original Amount of Loan

100.49

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.49

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 09 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

100.49

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 30 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4287

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Gallagher Printing

Mailing Address

9195 Main Strett

City

Clarence

State

NY

ZIP Code

14031

☒ Personal Funds of the Candidate

Original Amount of Loan

116.36

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

116.36

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 13 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

116.36

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 31 OF 31

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4283

COMMITTEE TO ELECT STOCKER FOR CONGRESS

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

Election: 2026

Olean Times Herald

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

639 Norton Drive

City

Olean

State

NY

ZIP Code

14760

☒ Personal Funds of the Candidate

Original Amount of Loan

2475.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2475.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 21 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

2475.00

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

35896.24

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