

**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.

1 2 F E 4 M 5

MIKE KELLY FOR CONGRESS

ADDRESS (number and street)

PO BOX 476



Check if different than previously reported. (ACC)

LYNDORA

PA

16045-0476

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00474189

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

PA

16

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  
10 / 01 / 2025

through

M M / D D / Y Y Y Y  
12 / 31 / 2025

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 KING, THOMAS, W, , III

Signature of Treasurer

KING, THOMAS, W, , III

Date

M M / D D / Y Y Y Y  
01 / 30 / 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

**MIKE KELLY FOR CONGRESS**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	2	5

To:

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

	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)) ....	139037.87	678118.09
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	11886.65
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	139037.87	666231.44
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	130202.27	569842.24
(b) Total Offsets to Operating Expenditures (from Line 14) .....	3600.79	3620.93
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	126601.48	566221.31
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	1132373.79	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	90000.00	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**MIKE KELLY FOR CONGRESS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
10 / 01 / 2025

To:

M M / D D / Y Y Y Y  
12 / 31 / 2025**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than  
Political Committees****(i) Itemized (use Schedule A).....**

31850.00

184256.70

**(ii) Unitemized .....**

437.87

944.33

**(iii) TOTAL of contributions  
from individuals .....**

32287.87

185201.03

**(b) Political Party Committees.....**

0.00

0.00

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

106750.00

492917.06

**(d) The Candidate .....**

0.00

0.00

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

139037.87

678118.09

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

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the  
Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

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

0.00

0.00

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

3600.79

3620.93

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

0.00

0.04

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

142638.66

681739.06

# **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.....	130202.27	569842.24
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	6886.65
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	11886.65
21. OTHER DISBURSEMENTS .....	4127.00	112868.33
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	134329.27	694597.22

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1124064.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	142638.66
25. SUBTOTAL (add Line 23 and Line 24).....	1266703.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	134329.27
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1132373.79

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

PAGE 5 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

OLANDER, DAVID, , ,

**A.**

Mailing Address 12624 WYCKLOW DR

City

CLIFTON

State

VA

Zip Code

20124-1616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPITOL COUNSEL LLC

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	2	5

Transaction ID : A5673FBE359B3449D853

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

RODRIGUEZ, JAVIER, , ,

**B.**

Mailing Address 4550 S LAFAYETTE ST

City

ENGLEWOOD

State

CO

Zip Code

80113-5946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAVITA INC.

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	2	5

Transaction ID : AAE8DF5DFC74D4679911

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

KIM, THOMAS, , ,

**C.**

Mailing Address 7009 ARBOR LN

City

MC LEAN

State

VA

Zip Code

22101-1545

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THOMAS CAPITOL PARTNERS, INC.

Occupation

PRESIDENT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : ADB5B995686CF4B3BA49

Amount of Each Receipt this Period

500.00



Memo Item

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

4000.00

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

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

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

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ANDERSON, DOUGLAS, D., ,

**A.**

Mailing Address 918 LATONKA DR

City  
MERCER

State  
PA

Zip Code  
16137-9745

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ANDERSON COACH & TRAVEL

Occupation  
OWNER

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 30 2025

Transaction ID : A050523942ACD40C8B38

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

UEHLECKE, NICHOLAS, , ,

**B.**

Mailing Address 100 I ST SE  
APT 816

City  
WASHINGTON

State  
DC

Zip Code  
20003-4866

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TODD STRATEGY GROUP

Occupation  
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 30 2025

Transaction ID : A7E5C42F3A9B54B5B85C

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SED, KAREN, W., ,

**C.**

Mailing Address 395 E STATE ST

City  
SHARON

State  
PA

Zip Code  
16146-1818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WINNER CORP

Occupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 21 2025

Transaction ID : A1E252C89ED2A46669A7

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)..... ▶

4750.00

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

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ZIRKELBACH, MARY KATHLEEN, , ,

**A.**

Mailing Address 1821 23RD ST NW

City

WASHINGTON

State

DC

Zip Code

20008-4030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ZIRKELBACH STRATEGIES

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A0559B425544443E0A79

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CULLEY, ERIN, , ,

**B.**

Mailing Address 8863 SUNSET CREST PL

City

LOS ANGELES

State

CA

Zip Code

90046-1847

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
12		17		2025

Transaction ID : AAC236091D1894ABB8A3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MAUGHAN, DAVID, , ,

**C.**

Mailing Address 887 FAIRCHILD DR

City

HIGHLANDS RANCH

State

CO

Zip Code

80126-4756

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAVITA

Occupation

HEALTHCARE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		19		2025

Transaction ID : A56025BB7184C429FB20

Amount of Each Receipt this Period

2500.00

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

4000.00

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

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

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

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BALCERZAK, ARTHUR, T, ,

**A.**

Mailing Address 678 FORKER BLVD

City  
SHARON

State  
PA

Zip Code  
16146-3632

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
ENGINEER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 21 2025

Transaction ID : AEAFA7A20F5FE42E8BD2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FISHER, MATTHEW, , ,

**B.**

Mailing Address 1509 SANCHEZ AVE

City  
BURLINGAME

State  
CA

Zip Code  
94010-5015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ADOBE

Occupation  
RESEARCH SCIENTIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 12 2025

Transaction ID : A6730A5311DA448C3B83

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ERNST, MARCIA, L, ,

**C.**

Mailing Address 8884 MERCER PIKE

City  
MEADVILLE

State  
PA

Zip Code  
16335-9275

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ERNST SEEDS

Occupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 21 2025

Transaction ID : A9BE03B356FD44D68816

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)..... ▶

2250.00

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

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

FERENCE, MICHAEL, , ,

**A.**

Mailing Address 418 C ST NE

City

WASHINGTON

State

DC

Zip Code

20002-5818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

S-3

Occupation

PARTNER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 01 2025

Transaction ID : A58D9D453B6444C9C9B6

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CHILDS, HARVEY, , ,

Mailing Address 131 HADLEY RD

City

GREENVILLE

State

PA

Zip Code

16125-9701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

PRIVATE INVESTOR

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 21 2025

Transaction ID : A1E0B6F5E9DCF4E199BE

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

WORRALL, THOMAS, , ,

Mailing Address 1401 H ST NW  
STE 525

City

WASHINGTON

State

DC

Zip Code

20005-2374

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WHITMER &amp; WORRALL

Occupation

GOVT AFFAIRS CONSULTANT

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 18 2025

Transaction ID : A8C0B45E2C666441395C

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)..... ▶

1500.00

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

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CHOE, YONG, , ,

**A.**Mailing Address 45 SUTTON SQ SW  
UNIT 806City  
WASHINGTONState  
DCZip Code  
20024-3486FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YC CONSULTING, LLCOccupation  
CONSULTING

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 29 2025

Transaction ID : AA1AC985B8B054A85BE9

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PARE, JOHN, , , JR.

**B.**

Mailing Address 1746 WEBSTER STREET

City  
BALTIMOREState  
MDZip Code  
21230-4747FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NATIONAL FEDERATION OF THE BLINDOccupation  
EXECUTIVE DIRECTOR FOR ADVOCACY AN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 17 2025

Transaction ID : AF8850C67C9FE4327B79

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PICARD, TYRON, , ,

**C.**

Mailing Address 807 RICHLAND AVE

City  
LAFAYETTEState  
LAZip Code  
70508-6662FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE PICARD GROUPOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 23 2025

Transaction ID : AEA041DC12D254F97BEE

Amount of Each Receipt this Period

3500.00

☐ Memo Item

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CESLAK, YVONNE, , ,

**A.**

Mailing Address 4720 LAMOR RD

City

HERMITAGE

State

PA

Zip Code

16148-3003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 29 2025

Transaction ID : A2F96C4868D6B448D943

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LIVAUDAIS, TINA, , ,

**B.**

Mailing Address 725 CHURCH PT

City

BELLE CHASSE

State

LA

Zip Code

70037-2450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAVITA, INC

Occupation

CHIEF NURSING OFFICER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 11 2025

Transaction ID : AB8E778FBED374675B90

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VAKERICS, MITCH, , ,

**C.**

Mailing Address 1634 N ABINGDON ST

City

ARLINGTON

State

VA

Zip Code

22207-2142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERITAS HEALTH POLICY

Occupation

CONSULTANT

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  
11 18 2025

Transaction ID : AC6AC6494555F43A59FC

Amount of Each Receipt this Period

1000.00

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

3750.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CAMPBELL, SCOTT, , ,

**A.**

Mailing Address PO BOX 607

City

WEST MIDDLESEX

State

PA

Zip Code

16159-0607

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 ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	5	

Transaction ID : AE2A3A9FA23984A17AAE

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RHOADS, BARRY, , ,

**B.**

Mailing Address 6793 FATHER JOHN CT

City

MCLEAN

State

VA

Zip Code

22101-2156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CASSIDY &amp; ASSOCIATES

Occupation

GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	5	

Transaction ID : A77E1FBED67B74BA2BDF

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ZIEBART, LORI, , ,

**C.**Mailing Address 1010 SMINOLE DR  
STE 1012

City

FORT LAUDERDALE

State

FL

Zip Code

33304-3220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ENERGY INFRASTRUCTURE COUNCIL

Occupation

PRESIDENT/CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : AE672FF0C6D81425E803

Amount of Each Receipt this Period

1500.00

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

3100.00

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PHILSON, KELLY, , ,

**A.**

Mailing Address 1736 T ST NW

APT B

City

WASHINGTON

State

DC

Zip Code

20009-7178

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAVITA

Occupation

DIRECTOR

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  
12 05 2025

Transaction ID : AF4B508FA4B9444D78A1

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ANDERSON, DOUGLAS, D., ,

**B.**

Mailing Address 918 LATONKA DR

City

MERCER

State

PA

Zip Code

16137-9745

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ANDERSON COACH & TRAVEL

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 30 2025

Transaction ID : AE439C213D6554E00BE0

Amount of Each Receipt this Period

3500.00

☐ 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)..... ▶

4000.00

31850.00

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
INTERDIGITAL, INC., PAC

**A.**

Mailing Address 200 BELLEVUE PKWY  
STE 300

City  
WILMINGTON

State  
DE

Zip Code  
19809-3727

FEC ID number of contributing  
federal political committee.

**C** C00400333

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 12 2025

**Transaction ID : A334317274C344C17986**

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
AMERICAN FOREST & PAPER ASSOC. PAC

**B.**

Mailing Address 601 THIRTEENTH ST, NW  
SUITE 1000N

City  
WASHINGTON

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C** C00029348

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 06 2025

**Transaction ID : AC73F907F42914BBA8C8**

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
REYNOLDS AMERICAN PAC

**C.**

Mailing Address PO BOX 718

City  
WINSTON SALEM

State  
NC

Zip Code  
27102-0718

FEC ID number of contributing  
federal political committee.

**C** C00042002

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 12 2025

**Transaction ID : A285E18DE98114B449EE**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

7500.00

**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  
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**INDEPENDENT COMMUNITY BANKERS PAC****A.**Mailing Address 1100 NEW YORK AVENUE, NW  
SUITE 500 EASTCity  
WASHINGTONState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.**C** C00032698

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	2	5

Transaction ID : A1B6E863A71DA4DFB8C3

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PATH PAC - COLLEGE OF AMERICAN PATHOLOGISTS PAC****B.**Mailing Address 1001 G STREET NW  
SUITE 425 WESTCity  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00274944

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	2	5

Transaction ID : ACE8B5554B2774FF78E6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**DELL TECHNOLOGIES, INC. POLITICAL ACTION COMMITTEE****C.**Mailing Address 400-444 NORTH CAPITOL STREET NW  
SUITE 700City  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00369751

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	2	5

Transaction ID : AFE3506E44DEC45A3AC6

Amount of Each Receipt this Period

2500.00

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

5500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SENIORS HOUSING PAC****A.**

Mailing Address 5225 WISCONSIN AVE NW, SUITE 502

City

WASHINGTON

State

DC

Zip Code

20016

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

C00325332

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 12 2025

12 12 2025

Transaction ID : A8CEDD611313448EA802

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ESCA PAC****B.**Mailing Address 750 9TH STREET NW  
SUITE 650

City

WASHINGTON

State

DC

Zip Code

20001

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

C00458257

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 26 2025

11 26 2025

Transaction ID : A375EE7C0250040E383F

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SHEET METAL & AIR CONDITIONING CONTRACTORS PAC****C.**

Mailing Address 4201 LAFAYETTE CENTER DRIVE

City

CHANTILLY

State

VA

Zip Code

20151-1209

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

C00013961

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 12 2025

12 12 2025

Transaction ID : AF48708CF578F4B1A979

Amount of Each Receipt this Period

2500.00

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

6500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RAPTOR PAC****A.**

Mailing Address PO BOX 4864

City  
MIDLANDState  
TXZip Code  
79704-4864FEC ID number of contributing  
federal political committee.**C** C00749481

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	5	

Transaction ID : A99C86D2E667E420199B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**FINSECA PAC****B.**Mailing Address 600 13TH ST NW  
STE 550City  
WASHINGTONState  
DCZip Code  
20005-3029FEC ID number of contributing  
federal political committee.**C** C00447565

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : AB1C2D99944624627A2B

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HOOVER, LUNDY, & BOOKMAN PC PAC****C.**Mailing Address 401 9TH ST NW  
STE 550City  
WASHINGTONState  
DCZip Code  
20004-2141FEC ID number of contributing  
federal political committee.**C** C00548404

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	5	

Transaction ID : AC9A3049C703243438EF

Amount of Each Receipt this Period

1500.00

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

4000.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL TOOLING & MACHINING ASSOC. PAC**

**A.**

Mailing Address 1357 ROCKSIDE ROAD

City

CLEVELAND

State

OH

Zip Code

44134

FEC ID number of contributing  
federal political committee.

**C** C00043091

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 08 / 2025

08

2025

Transaction ID : AE5087858DC744A8C939

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**LINCOLN FINANCIAL GROUP POLITICAL ACTION COMMITTEE**

**B.**

Mailing Address 150 N RADNOR CHESTER RD STE A305

City

RADNOR

State

PA

Zip Code

19087

FEC ID number of contributing  
federal political committee.

**C** C00110577

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 29 / 2025

29

2025

Transaction ID : A69365FDA23054350983

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**INVESTMENT COMPANY INSTITUTE PAC**

**C.**

Mailing Address 1401 H ST NW  
# 1200

City

WASHINGTON

State

DC

Zip Code

20005-2110

FEC ID number of contributing  
federal political committee.

**C** C00105981

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2025

31

2025

Transaction ID : AA9FB543FED52479FAC3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

5000.00

**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  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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			15

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**Full Name (Last, First, Middle Initial)  
AFLAC INCORPORATED PAC

Mailing Address 1932 WYNNTON ROAD

City  
COLUMBUSState  
GAZip Code  
31999FEC ID number of contributing  
federal political committee.

C C00034157

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 02 2025

Transaction ID : AD8D15AAB54A741548AB

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
VIZIENT, INC., PACMailing Address 799 9TH ST NW  
STE 210City  
WASHINGTONState  
DCZip Code  
20001-5325FEC ID number of contributing  
federal political committee.

C C00199497

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 12 2025

Transaction ID : A0C62752B7BA84DA8939

Amount of Each Receipt this Period

1500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
LABORATORY CORPORATION OF AMERICA PAC

Mailing Address 531 SOUTH SPRING STREET

City  
BURLINGTONState  
NCZip Code  
27215FEC ID number of contributing  
federal political committee.

C C00314997

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : A378CAB33580D4E379F4

Amount of Each Receipt this Period

3000.00

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

7000.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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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)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL INDEPENDENT AUTOMOBILE DEALERS ASSOC (NIADA) PAC**

Mailing Address 4621 S COOPER STREET, STE 131-295

City  
ARLINGTONState  
TXZip Code  
76017FEC ID number of contributing  
federal political committee.**C** C00507699

Name of Employer

Occupation

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
10		06		2025

Transaction ID : A7294F9E16A6D46E983C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICA'S HEALTH INSURANCE PLANS (AHIP PAC)**Mailing Address 601 PENNSYLVANIA AVENUE NW  
SOUTH BUILDINGCity  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00106740

Name of Employer

Occupation

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
10		02		2025

Transaction ID : A21D1E7BBF14A45CA90B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN PODIATRIC MEDICAL ASSOC. (APMA-PAC)**

Mailing Address 11400 ROCKVILLE PIKE, SUITE 220

City  
ROCKVILLEState  
MDZip Code  
20852-3004FEC ID number of contributing  
federal political committee.**C** C00008839

Name of Employer

Occupation

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
12		29		2025

Transaction ID : ABCE37C2AD301418DB21

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SCHWAN PAC

A.

Mailing Address 115 WEST COLLEGE DRIVE

City  
MARSHALL

State  
MN

Zip Code  
56258

FEC ID number of contributing  
federal political committee.

C C00360362

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : AFB0535B0F580495A861

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN FROZEN FOOD INSTITUTE PAC (FROZEN FOOD PAC)

B.

Mailing Address 1210 S GLEBE RD  
# NO4330

City  
ARLINGTON

State  
VA

Zip Code  
22204-0200

FEC ID number of contributing  
federal political committee.

C C00385740

Name of Employer

Occupation

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  
12 31 2025

Transaction ID : A651652D946C949EAB91

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REALTORS PAC

C.

Mailing Address 430 N MICHIGAN AVE

City  
CHICAGO

State  
IL

Zip Code  
60611-4011

FEC ID number of contributing  
federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 05 2025

Transaction ID : AFAF84E6564544994A92

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**

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PRECISION METALFORMING ASSOCIATION PAC**

**A.**

Mailing Address 6363 OAK TREE BLVD

City  
INDEPENDENCE

State  
OH

Zip Code  
44131

FEC ID number of contributing  
federal political committee.

**C** C00082271

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 12 2025

Transaction ID : A1732CAB7E5CB40AA996

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SOCIETY OF THORACIC SURGEONS PAC**

**B.**

Mailing Address 20 F ST NW  
SUITE 310 C

City  
WASHINGTON

State  
DC

Zip Code  
20001-6700

FEC ID number of contributing  
federal political committee.

**C** C00325936

Name of Employer

Occupation

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  
12 31 2025

Transaction ID : A5C021C16CDBF45EA9A4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CARDINAL HEALTH INC. PAC**

**C.**

Mailing Address 7000 CARDINAL PL

City  
DUBLIN

State  
OH

Zip Code  
43017-1091

FEC ID number of contributing  
federal political committee.

**C** C00332833

Name of Employer

Occupation

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  
12 31 2025

Transaction ID : AE96D906101CF46E68E6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

3500.00

**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  
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PHARMACEUTICAL RESEARCH &amp; MANUFACTURERS OF AMERICA BETTER GOVT COMMITTEE

**A.**Mailing Address 670 MAINE AVE SW  
STE 1000City  
WASHINGTONState  
DCZip Code  
20024-3556FEC ID number of contributing  
federal political committee.**C** C00021972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		02		2025

Transaction ID : ADE6264AE80FD4786899

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN PHYSICAL THERAPY ASSOC. PAC

**B.**

Mailing Address 3030 POTOMAC AVENUE, SUITE 100

City  
ALEXANDRIAState  
VAZip Code  
22305FEC ID number of contributing  
federal political committee.**C** C00012880

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
10		06		2025

Transaction ID : AAB312F39CFFE4F50A03

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF OTOLARYNGOLOGY-HEAD AND NECK SURGERY ENT PAC

**C.**

Mailing Address 1650 DIAGONAL RD

City  
ALEXANDRIAState  
VAZip Code  
22314-2857FEC ID number of contributing  
federal political committee.**C** C00306449

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : A7C6B9BCDECF8498DAE9

Amount of Each Receipt this Period

1500.00

☐ Memo Item

7500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MORTGAGE BANKERS ASSOCIATION PAC (MORPAC)****A.**

Mailing Address 1919 M ST NW

FL 5

City

WASHINGTON

State

DC

Zip Code

20036-3572

FEC ID number of contributing  
federal political committee.**C** C00004812

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		18		2025

Transaction ID : A134D6469A028427591F

Amount of Each Receipt this Period

2000.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

**VERIZON COMMUNICATIONS, INC. PAC (VERIZON PAC)**

Mailing Address 1300 I ST NW

ATTN: TAYLOR CRAIG

City

WASHINGTON

State

DC

Zip Code

20005-3314

FEC ID number of contributing  
federal political committee.**C** C00186288

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		29		2025

Transaction ID : AA7B36A60D3CE41A29CC

Amount of Each Receipt this Period

2000.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

**THE US ONCOLOGY NETWORK PAC**

Mailing Address 10101 WOODLOCH FOREST DR

City

THE WOODLANDS

State

TX

Zip Code

77380

FEC ID number of contributing  
federal political committee.**C** C00339655

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		26		2025

Transaction ID : AEF8949E9CAA84EC1A1D

Amount of Each Receipt this Period

2500.00



Memo Item

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

6500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL EMERGENCY MEDICINE PAC****A.**

Mailing Address 4950 W ROYAL LANE

City  
IRVINGState  
TXZip Code  
75038FEC ID number of contributing  
federal political committee.**C** C00140061

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 12 2025

Transaction ID : A841F2FAE6E144503AFA

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NEW YORK LIFE INSURANCE PAC****B.**

Mailing Address 51 MADISON AVENUE, ROOM 1109

City  
NEW YORKState  
NYZip Code  
10010FEC ID number of contributing  
federal political committee.**C** C00158881

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 31 2025

Transaction ID : AF6B5899D631E4673A5E

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**KOCH INDUSTRIES INC. PAC****C.**

Mailing Address 4111 E 37TH ST N

City  
WICHITAState  
KSZip Code  
67220-3203FEC ID number of contributing  
federal political committee.**C** C00103820

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 17 2025

Transaction ID : A6458B9B0D6F6488B9D3

Amount of Each Receipt this Period

2500.00

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

7500.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PATH PAC - COLLEGE OF AMERICAN PATHOLOGISTS PAC**

**A.**

Mailing Address 1001 G STREET NW

SUITE 425 WEST

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C** C00274944

Name of Employer

Occupation

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  
12 02 2025

**Transaction ID : A92938A968D134943A24**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HIGHMARK PAC OF HIGHMARK INC.**

**B.**

Mailing Address 1800 CENTER ST

City

CAMP HILL

State

PA

Zip Code

17011-1741

FEC ID number of contributing  
federal political committee.

**C** C00302844

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 02 2025

**Transaction ID : A6721F7B053474943BA3**

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PPG INDUSTRIES INC. PAC**

**C.**

Mailing Address ONE PPG PLACE, ATTN: BRYAN IAMS

City

PITTSBURGH

State

PA

Zip Code

15272

FEC ID number of contributing  
federal political committee.

**C** C00034298

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 25 2025

**Transaction ID : A6AC15022A53D4F1A9FB**

Amount of Each Receipt this Period

3500.00

☐ Memo Item

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

5750.00

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

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**INTERSTATE NATURAL GAS ASSOCIATION OF AMERICA PAC**

**A.**

Mailing Address 25 MASSACHUSETTS AVE. NW  
SUITE 500N

City  
WASHINGTON

State  
DC

Zip Code  
20001

FEC ID number of contributing  
federal political committee.

**C** C00116145

Name of Employer

Occupation

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  
12 12 2025

Transaction ID : A37D8C872928945FEAF7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. PAC**

**B.**

Mailing Address 1875 I ST NW  
STE 500

City  
WASHINGTON

State  
DC

Zip Code  
20006-5425

FEC ID number of contributing  
federal political committee.

**C** C00303339

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 27 2025

Transaction ID : A7ABF8124FA4E484C8BB

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN DENTAL PAC**

**C.**

Mailing Address 400 C ST NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-5818

FEC ID number of contributing  
federal political committee.

**C** C00000729

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : A4E22B1717276466C956

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

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

7500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

INT' L UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST NW

City

WASHINGTON

State

DC

Zip Code

20036-4709

FEC ID number of contributing  
federal political committee.

C C00029504

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 29 / 2025D D / Y Y Y Y Y  
29 / 2025Y Y Y Y Y  
2025

Transaction ID : A64BEEF9B65BB47EFA38

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TIAA PAC

Mailing Address 1300 I ST NW  
STE 300

City

WASHINGTON

State

DC

Zip Code

20005-3314

FEC ID number of contributing  
federal political committee.

C C00431361

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2025D D / Y Y Y Y Y  
31 / 2025Y Y Y Y Y  
2025

Transaction ID : A74CC97BD78AF4A2B866

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MARATHON PETROLEUM CORP. EMPLOYEES PAC

Mailing Address 539 S MAIN ST

City

FINDLAY

State

OH

Zip Code

45840

FEC ID number of contributing  
federal political committee.

C C00496307

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 31 / 2025D D / Y Y Y Y Y  
31 / 2025Y Y Y Y Y  
2025

Transaction ID : A1E73D88C7DF24084B4C

Amount of Each Receipt this Period

2500.00

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

10000.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALLIED PILOTS ASSOCIATION PAC**Mailing Address 14600 TRINITY BLVD  
SUITE 500City  
FORT WORTHState  
TXZip Code  
76155FEC ID number of contributing  
federal political committee.**C** C00267849

Name of Employer

Occupation

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
12		02		2025

Transaction ID : A96C0515A1EA7467A984

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**QUEST DIAGNOSTICS INC. PAC**

Mailing Address 500 PLAZA DRIVE

City  
SECAUCUSState  
NJZip Code  
07094FEC ID number of contributing  
federal political committee.**C** C00329185

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		19		2025

Transaction ID : A0573897A06AE4E929A2

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF BENEFITS AND INSURANCE PROFESSIONALS PAC (NABIP PAC)**Mailing Address 999 E ST NW  
STE 400City  
WASHINGTONState  
DCZip Code  
20004-2007FEC ID number of contributing  
federal political committee.**C** C00283135

Name of Employer

Occupation

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
12		31		2025

Transaction ID : AE49108B2CD1F42D088F

Amount of Each Receipt this Period

1000.00

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

4500.00

**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)

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WESTINGHOUSE ELECTRIC COMPANY LLC PAC**

Mailing Address 1730 PENNSYLVANIA AVE NW  
SUITE 475

City  
WASHINGTON

State  
DC

Zip Code  
20006

FEC ID number of contributing  
federal political committee.

**C** C00346361

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 12 2025

Transaction ID : A1183C5A974E24AA392E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN ACADEMY OF FAMILY PHYSICIANS PAC**

Mailing Address 1133 CONNECTICUT AVE NW  
STE 1100

City  
WASHINGTON

State  
DC

Zip Code  
20036-4342

FEC ID number of contributing  
federal political committee.

**C** C00411553

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 02 2025

Transaction ID : A5B0A677D7FD44D859E3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HEALTH & FITNESS ASSOCIATION PAC (FITPAC)**

Mailing Address 70 FARGO ST

City  
BOSTON

State  
MA

Zip Code  
02210-2122

FEC ID number of contributing  
federal political committee.

**C** C00335257

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 31 2025

Transaction ID : ACEBC03686F134029A6F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NORTHWESTERN MUTUAL FEDERAL PAC****A.** Mailing Address 720 E WISCONSIN AVE

City

MILWAUKEE

State

WI

Zip Code

53202-4703

FEC ID number of contributing  
federal political committee.**C** C00197095

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		31		2025

Transaction ID : AE6FAFEB3FA3149E49C9

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** REGIONS FINANCIAL CORPORATION PACMailing Address 1015 NW 15TH ST  
SUITE 920

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00432252

Name of Employer

Occupation

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
12		12		2025

Transaction ID : ACBF388D404374E54B6E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** COMMUNITY ACTION PROGRAM PACMailing Address 1 MASSACHUSETTS AVE NW  
SUITE 310

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00163048

Name of Employer

Occupation

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
12		12		2025

Transaction ID : AB79453E578EF47DF870

Amount of Each Receipt this Period

1000.00

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

4500.00

**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 32 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL BEER WHOLESALERS ASSOC. PAC**

**A.**

Mailing Address 277 S. WASHINGTON STREET  
SUITE 500

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-3672

FEC ID number of contributing  
federal political committee.

**C** C00144766

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 12 2025

Transaction ID : AF5DB78B0FEED416C885

Amount of Each Receipt this Period

2500.00

☐ 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 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

Amount of Each Receipt this Period

☐ Memo Item

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

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

2500.00

106750.00

# **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 33 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BAYFRONT CONVENTION CENTER**

**A.** Mailing Address 1 SASSAFRAS PIER

City  
ERIE

State  
PA

Zip Code  
16507-2011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

810.99

Date of Receipt

M M / D D / Y Y Y Y Y  
10 17 2025

Transaction ID : A840F9AC800604EBD97D

Amount of Each Receipt this Period

810.99

☐ Memo Item

VENDOR REFUND OF OVERPAYMENT

Full Name (Last, First, Middle Initial)

**TESLA BIOHEALING WELLNESS & RESORT**

**B.** Mailing Address 139 PITTSBURGH RD

City  
BUTLER

State  
PA

Zip Code  
16001-3280

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 30 2025

Transaction ID : AEB9927140AF94946B8C

Amount of Each Receipt this Period

500.00

☐ Memo Item

VENDOR REFUND OF OVERPAYMENT

Full Name (Last, First, Middle Initial)

**AMERICAN AIRLINES**

**C.** Mailing Address 4333 AMON CARTER BLVD.

City  
FORT WORTH

State  
TX

Zip Code  
76155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1863.08

Date of Receipt

M M / D D / Y Y Y Y Y  
11 21 2025

Transaction ID : A262125EF28AC43FA8C4

Amount of Each Receipt this Period

1863.08

☐ Memo Item

VENDOR REFUND OF OVERPAYMENT

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

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

3174.07

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

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KELLY, GEORGE, J, , JR

**A.**

Mailing Address 239 W PEARL ST

City  
BUTLERState  
PAZip Code  
16001-4267FEC ID number of contributing  
federal political committee.

C H0PA03271

Name of Employer  
US CONGRESSOccupation  
CONGRESSMAN

Receipt For: 2022

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

425.32

Date of Receipt

M M / D D / Y Y Y Y Y  
10 20 2025

Transaction ID : ADA4E4566D8964B1AA0E

Amount of Each Receipt this Period

425.32

☐ Memo Item

VENDOR REFUND OF OVERPAYMENT

**B.**

Full Name (Last, First, Middle Initial)

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**C.**

Full Name (Last, First, Middle Initial)

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)..... ▶

425.32

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

3599.39

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

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	2		2	0	2	5

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

**C**Purpose of Disbursement  
MONTHLY STATEMENT

001

Amount of Each Disbursement this Period

212.00

Transaction ID : BF27CF1C985FF4C209EE

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. SKOPENOW**

Mailing Address 12 E 49TH ST

Date of Disbursement

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

City  
NEW YORKState  
NYZip Code  
10017-1004

FEC Identification Number

**C**Purpose of Disbursement  
CYBER SECURITY SERVICES

001

Amount of Each Disbursement this Period

250.00

Transaction ID : B61E0DE6AF0D24C258E9

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET STREET

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94105

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

8.55

Transaction ID : B2CB85F2A6A6E4A65BF7

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

470.55

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

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

PAGE 36 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SAFEWAY - DC**

Mailing Address 490 L ST NW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20001-2545

FEC Identification Number

**C**Purpose of Disbursement  
EVENT CATERING

001

Category/  
Type

Amount of Each Disbursement this Period

185.00

Transaction ID : BE143CB4E9D1B4E35960

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. SHEETZ**

Mailing Address 4662 W. RIDGE ROAD

Date of Disbursement

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

City  
ERIEState  
PAZip Code  
16506

FEC Identification Number

**C**Purpose of Disbursement  
FUEL

002

Category/  
Type

Amount of Each Disbursement this Period

63.48

Transaction ID : B0E0FF9E6C44B4009946

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	6		2	0	2	5

City  
SAN FRANCISCOState  
CAZip Code  
94105

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

002

Category/  
Type

Amount of Each Disbursement this Period

19.50

Transaction ID : BD847780414C8421EB33

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

267.98

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SHOCKEY MINI STORAGE**

Mailing Address 140 SHOCKEY LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2025

City  
BUTLERState  
PAZip Code  
16001

FEC Identification Number

C

Purpose of Disbursement  
STORAGE UNIT EXPENSE

001

Amount of Each Disbursement this Period

74.20

Transaction ID : BABE0159E068442F09EA

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. BILL.COM**

Mailing Address 6220 AMERICA CENTER DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2025

City  
SAN JOSEState  
CAZip Code  
95002-2563

FEC Identification Number

C

Purpose of Disbursement  
SOFTWARE SERVICE

001

Amount of Each Disbursement this Period

30.85

Transaction ID : B353917DD7BCA40A7833

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		07		2025

City  
BETHESDAState  
MDZip Code  
20824

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Amount of Each Disbursement this Period

2.50

Transaction ID : B106E3F6E15BF42618F7

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

107.55

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

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

PAGE 38 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMAZON.COM**

Mailing Address SOUTH LAKE UNION

City  
SEATTLEState  
WAZip Code  
98101Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

663.57

Transaction ID : B088A4C1BE9604A51925

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B6E014F263CC34561BAF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

11.19

Transaction ID : B8FA984EE75EE4FBF99F

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

2674.76

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

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

PAGE 39 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 555 MARKET STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

12.00

Transaction ID : BAD45F468753B443088C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. USPS - ERIE PA**

Mailing Address 2108 E 38TH ST

City  
ERIEState  
PAZip Code  
16515-8001Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

183.45

Transaction ID : B1ABC53B0E695450A80B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MANGIALARDO'S**

Mailing Address 1317 PENNSYLVANIA AVE. SE

City  
WASHINGTONState  
DCZip Code  
20003-3027Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

109.42

Transaction ID : BEA049C3EDD1546AA888

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

304.87

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

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

PAGE 40 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MEMORIAL FLOWERS - TELEFLORA HQ**

Mailing Address 11444 W OLYMPIC BLVD

City  
LOS ANGELESState  
CAZip Code  
90064-1549Purpose of Disbursement  
FLOWERS

006

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

180.18

Transaction ID : BB593097E1C9A4E7A9F1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. U-HAUL MOVING & STORAGE**

Mailing Address 1505 PITTSBURGH AVE

City  
ERIEState  
PAZip Code  
16505Purpose of Disbursement  
STORAGE UNIT

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

121.85

Transaction ID : B84E425E927A6488BA2A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MEMORIAL FLOWERS - TELEFLORA HQ**

Mailing Address 11444 W OLYMPIC BLVD

City  
LOS ANGELESState  
CAZip Code  
90064-1549Purpose of Disbursement  
FLOWERS

006

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

121.88

Transaction ID : B9ACF1D4E5B694231BA2

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

423.91

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

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

PAGE 41 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE SALT LINE RESTAURANT**

Mailing Address 79 POTOMAC AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		14		2025

City  
WASHINGTONState  
DCZip Code  
20003-3848

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

88.70

Transaction ID : BDB5ED7FCCDD04BD4A94

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. VANCO PAYMENT SOLUTIONS**

Mailing Address 12600 WHITEWATER DRIVE, SUITE 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

City  
MINNETONKAState  
NEZip Code  
55343

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Amount of Each Disbursement this Period

23.95

Transaction ID : B23F56E19B5054AC9AC8

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. DUNN SIRIANNI, CAREY, , ,**

Mailing Address PO BOX 186

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

City  
SEWICKLEYState  
PAZip Code  
15143-0186

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Amount of Each Disbursement this Period

3900.00

Transaction ID : B8780E486F2534BD0846

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

4012.65

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

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

PAGE 42 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		15		2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL TAXES

001

Amount of Each Disbursement this Period

1759.69

Transaction ID : B734EA659BF8E4E0695C

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2025

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
EVENT CATERING

001

Amount of Each Disbursement this Period

664.69

Transaction ID : BE658ACC71CB9492181F

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2025

City  
SAN FRANCISCOState  
CAZip Code  
94105

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

8.33

Transaction ID : BCDE31BC83AAA44E39A2

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2432.71

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

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

PAGE 43 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ROSCOS SPORTS BAR**

Mailing Address 4646 BUFFALO RD

City  
ERIEState  
PAZip Code  
16510-2207Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	16	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

280.04

Transaction ID : B82E6FECBE67F46018FA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	17	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

2198.29

Transaction ID : BCB71D7A268A546E7812

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STEIGNER, ROSE, , ,**

Mailing Address PO BOX 250

City  
CHICORAState  
PAZip Code  
16025-0250Purpose of Disbursement  
VOID CHECK ISSUED 8/25/22

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2022

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
10	20	2025

FEC Identification Number

C

Amount of Each Disbursement this Period

- 45.00

Transaction ID : B0877B5D5041B496FA43

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

2433.33

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PENN NATIONAL INSURANCE**

Mailing Address PO BOX 2257

City  
HARRISBURGState  
PAZip Code  
17105Purpose of Disbursement  
VOID CHECK ISSUED 8/5/22

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2022

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

- 681.00

Transaction ID : B521E8FE72D174CCEA4B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TESLA BIOHEALING WELLNESS & RESORT**

Mailing Address 139 PITTSBURGH RD

City  
BUTLERState  
PAZip Code  
16001-3280Purpose of Disbursement  
SITE RENTAL

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : BD4FC2B6D96E0410E819

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ERIE CLUB**

Mailing Address 524 PEACH STREET

City  
ERIEState  
PAZip Code  
16501Purpose of Disbursement  
VOID CHECK ISSUED 8/18/22

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2022

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

- 200.00

Transaction ID : B2EB09D5065F042FCB9D

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

- 381.00

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

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

PAGE 45 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CARMINES**

Mailing Address 425 7TH STREET NW

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

431.46

Transaction ID : BF10C60F613E64871AC8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : B38EC45402C804C41980

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KELLY, GEORGE, J, , JR**

Mailing Address 239 W PEARL ST

City  
BUTLERState  
PAZip Code  
16001-4267Purpose of Disbursement  
REIMBURSEMENT REISSUE FROM 4/12/2021 MEMOS REPORTED WITH  
ORIGINAL EXPENSE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

425.32

Transaction ID : B70A4050127F14AAEA52

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

861.78

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

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

PAGE 46 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SAM'S CLUB - ERIE**

Mailing Address 7200 PEACH ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	2		2	0	2	5

City  
ERIEState  
PAZip Code  
16509-4754

FEC Identification Number

C

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

167.68

Transaction ID : B51D85C7F5AD546578B1

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. ROSCOS SPORTS BAR**

Mailing Address 4646 BUFFALO RD

Date of Disbursement

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

City  
ERIEState  
PAZip Code  
16510-2207

FEC Identification Number

C

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

280.98

Transaction ID : B2A21907ABCD401B855

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. DUNKIN DONUTS - DC**

Mailing Address 725 17TH ST NW

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20506-0200

FEC Identification Number

C

Purpose of Disbursement  
EVENT CATERING

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

733.92

Transaction ID : B999B93474BAD4AC0AC3

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1182.58

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

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

PAGE 47 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DOORDASH**Mailing Address 901 MARKET ST  
SUITE 600City  
SAN FRANCISCOState  
CAZip Code  
94103-1740Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

30.80

Transaction ID : B07E15668029546B2BB8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TESLA BIOHEALING WELLNESS & RESORT**

Mailing Address 139 PITTSBURGH RD

City  
BUTLERState  
PAZip Code  
16001-3280Purpose of Disbursement  
SITE RENTAL

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B8EF85BED65D24EDEADB

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. 5 GUYS**

Mailing Address 1400 I ST NW

City  
WASHINGTONState  
DCZip Code  
20005-2208Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

157.49

Transaction ID : BD094669144CA4EC3A30

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

688.29

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

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

PAGE 48 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. DUNKIN DONUTS - DC**

Mailing Address 725 17TH ST NW

City  
WASHINGTONState  
DCZip Code  
20506-0200Purpose of Disbursement  
EVENT CATERING

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

197.89

Transaction ID : B88EA4F8632DD4B00A33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. OCEAN PRIME**

Mailing Address 1341 G STREET NW

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

43.12

Transaction ID : BA823370F79864B62A95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHEETZ**

Mailing Address 4662 W. RIDGE ROAD

City  
ERIEState  
PAZip Code  
16506Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

68.27

Transaction ID : BEF29B5B2CECA4371AA7

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

309.28

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

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

PAGE 49 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 555 MARKET STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.45

Transaction ID : B1DEFEE2FF11E4CFFAB3

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

440.95

Transaction ID : B4BE12266DCAC40C7B95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TERRA DAVIS CONSULTING**Mailing Address 700 PENNSYLVANIA AVE. SE  
SUITE 2023City  
WASHINGTONState  
DCZip Code  
20003-2493Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

18300.00

Transaction ID : B267B4768D28F4281A79

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

18761.40

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

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

PAGE 50 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SHEETZ**

Mailing Address 4662 W. RIDGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2025

City  
ERIEState  
PAZip Code  
16506

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

57.06

Transaction ID : B5B239B16523D4BA8B3A

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1759.67

Transaction ID : B5E79D700AE874FD28DC

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2025

City  
SAN FRANCISCOState  
CAZip Code  
94105

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

21.53

Transaction ID : B746D1008EFC64D71A76

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1838.26

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

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

PAGE 51 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PNC BANK**

Mailing Address 37 MAIN STREET

Date of Disbursement

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

City  
HUDSONState  
OHZip Code  
44236

FEC Identification Number

C

Purpose of Disbursement  
BANK FEE

001

Amount of Each Disbursement this Period

15.00

Transaction ID : B520A4BB743514A57AB1

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 555 MARKET STREET

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94105

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

21.16

Transaction ID : B46491ADE8EFA4BA6806

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SKOPENOW**

Mailing Address 12 E 49TH ST

Date of Disbursement

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

City  
NEW YORKState  
NYZip Code  
10017-1004

FEC Identification Number

C

Purpose of Disbursement  
CYBER SECURITY SERVICES

001

Amount of Each Disbursement this Period

250.00

Transaction ID : B10D98513BC304933BE0

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

286.16

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

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

PAGE 52 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 555 MARKET STREET

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94105

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

10.48

Transaction ID : B8C7DD75A021247D4A27

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. SHOCKEY MINI STORAGE**

Mailing Address 140 SHOCKEY LANE

Date of Disbursement

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

City  
BUTLERState  
PAZip Code  
16001

FEC Identification Number

C

Purpose of Disbursement  
STORAGE UNIT EXPENSE

001

Amount of Each Disbursement this Period

74.20

Transaction ID : BF13231E6745D4628AA6

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. DOORDASH**Mailing Address 901 MARKET ST  
SUITE 600

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94103-1740

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

192.47

Transaction ID : B5B41750A886846FAB20

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

277.15

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

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

PAGE 53 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	D D	Y Y Y Y
11	04	2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

**C**Purpose of Disbursement  
PAYROLL FEE

001

Amount of Each Disbursement this Period

212.00

Transaction ID : B509A6E0ABD0F4E0388B

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. BILL.COM**

Mailing Address 6220 AMERICA CENTER DR

Date of Disbursement

M M	D D	Y Y Y Y
11	04	2025

City  
SAN JOSEState  
CAZip Code  
95002-2563

FEC Identification Number

**C**Purpose of Disbursement  
SOFTWARE SERVICE

001

Amount of Each Disbursement this Period

48.40

Transaction ID : B70C3B0EC932B4D15BE8

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SHEETZ**

Mailing Address 4662 W. RIDGE ROAD

Date of Disbursement

M M	D D	Y Y Y Y
11	06	2025

City  
ERIEState  
PAZip Code  
16506

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

66.21

Transaction ID : B79F34B3ABB1841C19C0

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

326.61

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

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

PAGE 54 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PANERA BREAD**

Mailing Address 4014 PEACH STREET

Date of Disbursement

M M	D D	Y Y Y Y
11	06	2025

City  
ERIEState  
PAZip Code  
16509

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

86.12

Transaction ID : B02893A8DD50C4014A0A

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. ELK'S LODGE #67 - ERIE - PA**

Mailing Address 2409 PENINSULA DR

Date of Disbursement

M M	D D	Y Y Y Y
11	06	2025

City  
ERIEState  
PAZip Code  
16506-2958

FEC Identification Number

C

Purpose of Disbursement  
SITE RENTAL

003

Amount of Each Disbursement this Period

773.80

Transaction ID : BEA4940C71E5E4E229E5

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. PANERA BREAD**

Mailing Address 4014 PEACH STREET

Date of Disbursement

M M	D D	Y Y Y Y
11	06	2025

City  
ERIEState  
PAZip Code  
16509

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

25.31

Transaction ID : BFD6B53B0DC5F4A16BD5

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

885.23

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

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

PAGE 55 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PANERA BREAD #2316**

Mailing Address 330 NEW CASTLE ROAD

City  
BUTLERState  
PAZip Code  
16001Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

140.73

Transaction ID : BB285FE9004434DD5A2F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TARA COUNTRY INN**

Mailing Address 2844 LAKE ROAD

City  
CLARKState  
PAZip Code  
16113Purpose of Disbursement  
EVENT CATERING/SITE RENTAL

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1607.12

Transaction ID : BA312A3F4328E40ECB10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : BDEED8BD27F874F36B65

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

3747.85

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

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

PAGE 56 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. U-HAUL MOVING & STORAGE**

Mailing Address 1505 PITTSBURGH AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2025

City  
ERIEState  
PAZip Code  
16505

FEC Identification Number

C

Purpose of Disbursement  
STORAGE UNIT

001

Amount of Each Disbursement this Period

121.85

Transaction ID : B3E2863A993974AEEDB5

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2025

City  
FORT WORTHState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

101.82

Transaction ID : B0D6B99FD67D44A5599A

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL TAXES

001

Amount of Each Disbursement this Period

1759.69

Transaction ID : B5CBA6870B05249298DB

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1983.36

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

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

PAGE 57 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. VANCO PAYMENT SOLUTIONS**

Mailing Address 12600 WHITEWATER DRIVE, SUITE 200

City  
MINNETONKAState  
NEZip Code  
55343Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

23.95

Transaction ID : B7C5C0EA89DDF4B3887C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BULLFEATHERS**

Mailing Address 410 FIRST STREET NE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

103.45

Transaction ID : B8F2BE3A557684C5286F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TOPS MARKET**

Mailing Address 1520 W 26TH ST

City  
ERIEState  
PAZip Code  
16508-1302Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

74.69

Transaction ID : B4DBAB8FCC4664437BFF

☐ Memo Item

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

202.09

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

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

PAGE 58 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

395.37

Transaction ID : BA9930E65CD554A4D998

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

City  
FORT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

936.36

Transaction ID : BD0CEE1DB1BB44CE6B20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

City  
FORT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

936.36

Transaction ID : B85C5B30D9EE64E7BA31

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

2268.09

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

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

PAGE 59 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

Date of Disbursement

M M	D D	Y Y Y Y
11	18	2025

City  
FORT WORTHState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

931.54

Transaction ID : BCA3EB903626F469BAD0

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

Date of Disbursement

M M	D D	Y Y Y Y
11	18	2025

City  
FORT WORTHState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

931.54

Transaction ID : BAE98AC1F1D6D4A75BA0

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S. WACKER DRIVE

Date of Disbursement

M M	D D	Y Y Y Y
11	19	2025

City  
CHICAGOState  
ILZip Code  
60606

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

843.76

Transaction ID : BBF9A75C4B0904908823

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2706.84

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

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

PAGE 60 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GET GO**

Mailing Address 1024 N MAIN ST

Date of Disbursement

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

City  
BUTLERState  
PAZip Code  
16001

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

66.68

Transaction ID : BA81E2FD9A5EC4DE7B46

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

Date of Disbursement

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

City  
FORT WORTHState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

87.13

Transaction ID : BDF8B5737608F40A1B6C

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. BUTLER EAGLE**

Mailing Address PO BOX 271

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	0		2	0	2	5

City  
BUTLERState  
PAZip Code  
16001

FEC Identification Number

C

Purpose of Disbursement  
SUBSCRIPTION

004

Amount of Each Disbursement this Period

25.00

Transaction ID : B9138CA0CA7AB4BD780B

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

178.81

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

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

PAGE 61 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. US HOUSE GIFT SHOP**

Mailing Address US HOUSE OF REPRESENTATIVES

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
DONOR GIFTS

006

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1254.00

Transaction ID : B93D6F604967741EFB48

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

City  
FORT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

35.00

Transaction ID : B2C861B2904CF4AF0AF1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCDONALDS**

Mailing Address 1706 WALNUT ST

City  
PHILADELPHIAState  
PAZip Code  
19103-6101Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

235.70

Transaction ID : B0402688EFD654E42BE0

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

1524.70

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

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

PAGE 62 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMAZON.COM**

Mailing Address SOUTH LAKE UNION

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	2	5

City  
SEATTLEState  
WAZip Code  
98101

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

211.80

Transaction ID : B619FED1089214845951

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

Date of Disbursement

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

City  
FORT WORTHState  
TXZip Code  
76155

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

35.00

Transaction ID : BFC9B63A8D03242DFB83

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET STREET

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94105

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

25.73

Transaction ID : B01C35C14EB544F6DB95

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

272.53

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

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

PAGE 63 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GET GO**

Mailing Address 1024 N MAIN ST

City  
BUTLERState  
PAZip Code  
16001Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

179.66

Transaction ID : B87EA3A3A80844B5A9EC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. THE BREAKERS HOTEL**

Mailing Address 1 S COUNTY RD

City  
PALM BEACHState  
FLZip Code  
33480-4023Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

968.35

Transaction ID : B4B43BE18D19B49DA868

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET STREET

City  
SAN FRANCISCOState  
CAZip Code  
94105Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

36.04

Transaction ID : B7DA1A8CAC6004DDC977

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

1184.05

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

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

PAGE 64 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SHEETZ**

Mailing Address 4662 W. RIDGE ROAD

Date of Disbursement

M M	D D	Y Y Y Y
11	26	2025

City  
ERIEState  
PAZip Code  
16506

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

59.59

Transaction ID : BB9E005AAC4244BC195B

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMAZON.COM**

Mailing Address SOUTH LAKE UNION

Date of Disbursement

M M	D D	Y Y Y Y
11	26	2025

City  
SEATTLEState  
WAZip Code  
98101

FEC Identification Number

**C**Purpose of Disbursement  
OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

403.69

Transaction ID : BFC73E16748E643BE947

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 233 S. WACKER DRIVE

Date of Disbursement

M M	D D	Y Y Y Y
11	26	2025

City  
CHICAGOState  
ILZip Code  
60606

FEC Identification Number

**C**Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

195.00

Transaction ID : B2787443F93C941A4A22

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

658.28

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

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

PAGE 65 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMAZON.COM**

Mailing Address SOUTH LAKE UNION

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	8		2	0	2	5

City  
SEATTLEState  
WAZip Code  
98101

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

108.12

Transaction ID : BAC83CDEF3F894D7A88D

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1634.69

Transaction ID : B411C9BABF44F459CA5F

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SHEETZ**

Mailing Address 4662 W. RIDGE ROAD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	2	5

City  
ERIEState  
PAZip Code  
16506

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

53.11

Transaction ID : B3C2EF5E424D74C96864

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1795.92

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SKOPENOW**

Mailing Address 12 E 49TH ST

City  
NEW YORKState  
NYZip Code  
10017-1004Purpose of Disbursement  
CYBER SECURITY SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : BA5ECAC1C39524CC68B1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GUSTO**

Mailing Address 525 20TH S

City  
SAN FRANCISCOState  
CAZip Code  
94107Purpose of Disbursement  
PAYROLL SERVICE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

212.00

Transaction ID : B8CBF6B7FD28C4732A2B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CVS PHARMACY**

Mailing Address 3750 STERRETTANIA RD

City  
ERIEState  
PAZip Code  
19506Purpose of Disbursement  
OFFICE SUPPLIES

006

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : BF9476AA55F4C4419ADD

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

762.00

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

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

PAGE 67 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SHOCKEY MINI STORAGE**

Mailing Address 140 SHOCKEY LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2025

City  
BUTLERState  
PAZip Code  
16001

FEC Identification Number

C

Purpose of Disbursement  
STORAGE UNIT EXPENSE

001

Amount of Each Disbursement this Period

74.20

Transaction ID : B6739D9CE496546F9875

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. US HOUSE GIFT SHOP**

Mailing Address US HOUSE OF REPRESENTATIVES

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2025

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
DONOR GIFTS

006

Amount of Each Disbursement this Period

380.00

Transaction ID : BB7D77372C70E42BA988

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 555 MARKET STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2025

City  
SAN FRANCISCOState  
CAZip Code  
94105

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

16.00

Transaction ID : B3021BDEF9D224CDC82D

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

470.20

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. U PICK 6 TAP HOUSE**

Mailing Address 333 STATE STREET

City  
ERIEState  
PAZip Code  
16507Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

130.96

Transaction ID : B57205519C1AA4737BA9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address UNION STATION

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
TRAVEL

002

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

424.00

Transaction ID : B7E416440E2DC402588F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS - ERIE PA**

Mailing Address 2108 E 38TH ST

City  
ERIEState  
PAZip Code  
16515-8001Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

103.00

Transaction ID : B432135D1EA5F48C78DB

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

657.96

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

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

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. USPS - ERIE PA**

Mailing Address 2108 E 38TH ST

Date of Disbursement

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

City  
ERIEState  
PAZip Code  
16515-8001

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

154.50

Transaction ID : BF4E18DC32CFB4B16AC7

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. USPS - ERIE PA**

Mailing Address 2108 E 38TH ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	2	5

City  
ERIEState  
PAZip Code  
16515-8001

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

163.50

Transaction ID : B0CACCC77C7F541C3827

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. PITNEY BOWES**

Mailing Address 3001 SUMMER ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	1		2	0	2	5

City  
STAMFORDState  
CTZip Code  
06905-4317

FEC Identification Number

C

Purpose of Disbursement  
SHIPPING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

90.72

Transaction ID : B3D1762F691E646ADB2F

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

408.72

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

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

PAGE 70 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. U-HAUL MOVING & STORAGE**

Mailing Address 1505 PITTSBURGH AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2025

City  
ERIEState  
PAZip Code  
16505

FEC Identification Number

C

Purpose of Disbursement  
STORAGE UNIT

001

Amount of Each Disbursement this Period

121.85

Transaction ID : B6AEDFC26AC32416EA8A

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address UNION STATION

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		12		2025

City  
WASHINGTONState  
DCZip Code  
20002

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

496.00

Transaction ID : B9F6ECAB054634652AFC

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. VANCO PAYMENT SOLUTIONS**

Mailing Address 12600 WHITEWATER DRIVE, SUITE 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

City  
MINNETONKAState  
NEZip Code  
55343

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Amount of Each Disbursement this Period

23.95

Transaction ID : B6B70EF9832C841BF928

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

641.80

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

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

PAGE 71 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

**C**Purpose of Disbursement  
PAYROLL TAXES

001

Amount of Each Disbursement this Period

1634.67

Transaction ID : B384BAC5CF21B40EC931

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. 3 WEST CLUB**

Mailing Address 3 W 51ST ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

City  
NEW YORKState  
NYZip Code  
10019-6909

FEC Identification Number

**C**Purpose of Disbursement  
EVENT CATERING

003

Amount of Each Disbursement this Period

1074.21

Transaction ID : B976C5B4C13924DD7B9D

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. US HOUSE GIFT SHOP**

Mailing Address US HOUSE OF REPRESENTATIVES

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2025

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

**C**Purpose of Disbursement  
OFFICE SUPPLIES

006

Amount of Each Disbursement this Period

10.75

Transaction ID : B503BD4F63883462C888

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2719.63

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

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

PAGE 72 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BENNY JOHN'S BAR & GRILL**

Mailing Address 8 E 4TH ST

City  
NEW YORKState  
NYZip Code  
10017Purpose of Disbursement  
EVENT CATERING

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

817.39

Transaction ID : B98C6F6A1F2274C32B71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VERIZON WIRELESS**

Mailing Address 540 BUTLER CROSSING, SUITE 5

City  
BUTLERState  
PAZip Code  
16001Purpose of Disbursement  
CELLULAR SERVICE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.49

Transaction ID : B3CB059A7D08A4574861

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 FIRST STREET SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

370.90

Transaction ID : B4C676CDC541A4DA4962

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

1438.78

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

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

PAGE 73 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SHEETZ**

Mailing Address 4662 W. RIDGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2025

City  
ERIEState  
PAZip Code  
16506

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

67.72

Transaction ID : B569B3F7EF1B149EEB89

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. U PICK 6 TAP HOUSE**

Mailing Address 333 STATE STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2025

City  
ERIEState  
PAZip Code  
16507

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

99.78

Transaction ID : B4E147708F6194AB8A8C

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address SOUTH LAKE UNION

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2025

City  
SEATTLEState  
WAZip Code  
98101

FEC Identification Number

C

Purpose of Disbursement  
OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

84.99

Transaction ID : B461391048FF5478B80C

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

252.49

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

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

PAGE 74 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GET GO**

Mailing Address 1024 N MAIN ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	2		2	0	2	5

City  
BUTLERState  
PAZip Code  
16001

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

51.80

Transaction ID : BB728078D91DD4B9F96D

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. TRATTORIA ALBERTO**

Mailing Address 508 8TH ST SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	2		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
EVENT CATERING

003

Amount of Each Disbursement this Period

2731.72

Transaction ID : B379BC40E04E64E8CBF4

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. PANERA BREAD**

Mailing Address 4014 PEACH STREET

Date of Disbursement

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

City  
ERIEState  
PAZip Code  
16509

FEC Identification Number

C

Purpose of Disbursement  
FOOD/BEVERAGE

001

Amount of Each Disbursement this Period

81.66

Transaction ID : B7F8D6447A796474E8C5

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2865.18

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

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

PAGE 75 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PANERA BREAD**

Mailing Address 4014 PEACH STREET

City  
ERIEState  
PAZip Code  
16509Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

80.22

Transaction ID : B5474C7488CB8415D805

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TERRA DAVIS CONSULTING**Mailing Address 700 PENNSYLVANIA AVE. SE  
SUITE 2023City  
WASHINGTONState  
DCZip Code  
20003-2493Purpose of Disbursement  
EVENT CATERING/SITE RENTAL/TRAVEL

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

8198.73

Transaction ID : BFD1C56DD05C5472D92C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TERRA DAVIS CONSULTING**Mailing Address 700 PENNSYLVANIA AVE. SE  
SUITE 2023City  
WASHINGTONState  
DCZip Code  
20003-2493Purpose of Disbursement  
EVENT CATERING/SITE RENTAL/TRAVEL

003

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20175.29

Transaction ID : BB653058628D747CDA84

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

28454.24

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

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

PAGE 76 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SHEETZ**

Mailing Address 4662 W. RIDGE ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2025

City  
ERIEState  
PAZip Code  
16506

FEC Identification Number

C

Purpose of Disbursement  
TRAVEL

002

Amount of Each Disbursement this Period

59.18

Transaction ID : B54C403C49A844FAE967

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. ANEDOT**Mailing Address 1340 POYDRAS STREET  
SUITE 1770

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

City  
NEW ORLEANSState  
LAZip Code  
70112-5204

FEC Identification Number

C

Purpose of Disbursement  
ONLINE PROCESSING

001

Amount of Each Disbursement this Period

1177.41

Transaction ID : B5A0EA8664A244D19B5C

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL TAXES

001

Amount of Each Disbursement this Period

1669.53

Transaction ID : BA5362B33FA45459FB82

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2906.12

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

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

PAGE 77 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GUSTO**

Mailing Address 525 20TH S

City  
SAN FRANCISCOState  
CAZip Code  
94107Purpose of Disbursement  
NET PAYROLL- SEE MEMOS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4966.48

Transaction ID : B5BE1D2C42AAB4C7A8AE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FULLER, PATRICK, , ,**

Mailing Address 804 WYOMING AVE

City  
ERIEState  
PAZip Code  
16505-3832Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1225.92

Transaction ID : B32EBC0337A6047BB901

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAWSON, KEVIN, , ,**

Mailing Address 427 SHEPHERD ST NW

City  
WASHINGTONState  
DCZip Code  
20011-5943Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

608.09

Transaction ID : B18BE03D28E384DAAA93

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

4966.48

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

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

PAGE 78 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BREWER, MELANIE, A, ,**

Mailing Address 3921 SASSAFRAS ST

City  
ERIEState  
PAZip Code  
16508-3047Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1971.77

Transaction ID : B47A650FB8E6C4B3E890

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. RITCHIE, QUINN, FAULKNER, ,**

Mailing Address 4424 7TH ST N

City  
ARLINGTONState  
VAZip Code  
22203-2001Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

327.78

Transaction ID : B69414E32413A416E846

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. KNOEDLER, MATTHEW, , ,**

Mailing Address 9340 CLOCKTOWER PL

City  
FAIRFAXState  
VAZip Code  
22031-1226Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

832.92

Transaction ID : B42AC18BBF9434BC5B8D

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

0.00

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

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

PAGE 79 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GUSTO**

Mailing Address 525 20TH S

City  
SAN FRANCISCOState  
CAZip Code  
94107Purpose of Disbursement  
NET PAYROLL - SEE MEMOS

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4841.47

Transaction ID : B80DAB6608B7547349E6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RITCHIE, QUINN, FAULKNER, ,**

Mailing Address 4424 7TH ST N

City  
ARLINGTONState  
VAZip Code  
22203-2001Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

202.77

Transaction ID : BD9B924AE25C94BB1A06

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. FULLER, PATRICK, , ,**

Mailing Address 804 WYOMING AVE

City  
ERIEState  
PAZip Code  
16505-3832Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1225.92

Transaction ID : B5FD377C003A74303A02

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

4841.47

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

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

PAGE 80 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BREWER, MELANIE, A, ,**

Mailing Address 3921 SASSAFRAS ST

City  
ERIEState  
PAZip Code  
16508-3047Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1971.77

Transaction ID : B7BDF2C9EFC75430084A

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. DAWSON, KEVIN, , ,**

Mailing Address 427 SHEPHERD ST NW

City  
WASHINGTONState  
DCZip Code  
20011-5943Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

608.09

Transaction ID : B3CDDA6DB73B74B008E4

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. KNOEDLER, MATTHEW, , ,**

Mailing Address 9340 CLOCKTOWER PL

City  
FAIRFAXState  
VAZip Code  
22031-1226Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

832.92

Transaction ID : B88662E8FF0E545B2AE8

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

0.00

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

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

PAGE 81 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
NET PAYROLL- SEE MEMOS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4841.48

Transaction ID : BFAB9DC0DDA0941D99D0

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. FULLER, PATRICK, , ,**

Mailing Address 804 WYOMING AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2025

City  
ERIEState  
PAZip Code  
16505-3832

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1225.92

Transaction ID : B8CDB2DCFE83A4844B23

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. BREWER, MELANIE, A, ,**

Mailing Address 3921 SASSAFRAS ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2025

City  
ERIEState  
PAZip Code  
16508-3047

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1971.77

Transaction ID : B49F9DF14CDC844CEBA7

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

4841.48

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

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

PAGE 82 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. DAWSON, KEVIN, , ,**

Mailing Address 427 SHEPHERD ST NW

City  
WASHINGTONState  
DCZip Code  
20011-5943Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

608.10

Transaction ID : BE34BA90E0C6C4214A84

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. RITCHIE, QUINN, FAULKNER, ,**

Mailing Address 4424 7TH ST N

City  
ARLINGTONState  
VAZip Code  
22203-2001Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

202.77

Transaction ID : B9168B7D3E96D4BC3AE8

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. KNOEDLER, MATTHEW, , ,**

Mailing Address 9340 CLOCKTOWER PL

City  
FAIRFAXState  
VAZip Code  
22031-1226Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

832.92

Transaction ID : BB83293BE107E4D85B5B

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

0.00

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

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

PAGE 83 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	D D	Y Y Y Y
11	30	2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
NET PAYROLL- SEE MEMOS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4966.47

Transaction ID : B2CBE43A132A4441D944

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. FULLER, PATRICK, , ,**

Mailing Address 804 WYOMING AVE

Date of Disbursement

M M	D D	Y Y Y Y
11	30	2025

City  
ERIEState  
PAZip Code  
16505-3832

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1225.92

Transaction ID : B6C01EB7B91EF4162913

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. DAWSON, KEVIN, , ,**

Mailing Address 427 SHEPHERD ST NW

Date of Disbursement

M M	D D	Y Y Y Y
11	30	2025

City  
WASHINGTONState  
DCZip Code  
20011-5943

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

608.10

Transaction ID : B073F295FB4E14FBCB99

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

4966.47

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

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

PAGE 84 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. KNOEDLER, MATTHEW, , ,**

Mailing Address 9340 CLOCKTOWER PL

City  
FAIRFAXState  
VAZip Code  
22031-1226Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

832.92

Transaction ID : B0237B20DEE2042419CE

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. RITCHIE, QUINN, FAULKNER, ,**

Mailing Address 4424 7TH ST N

City  
ARLINGTONState  
VAZip Code  
22203-2001Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

327.76

Transaction ID : B87DDA24337B7404388C

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BREWER, MELANIE, A, ,**

Mailing Address 3921 SASSAFRAS ST

City  
ERIEState  
PAZip Code  
16508-3047Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1971.77

Transaction ID : BD2C16FE8B9C84614B3A

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

0.00

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

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

PAGE 85 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
NET PAYROLL- SEE MEMOS

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4931.63

Transaction ID : B5D75BB41EC5E42D6AC9

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. FULLER, PATRICK, , ,**

Mailing Address 804 WYOMING AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

City  
ERIEState  
PAZip Code  
16505-3832

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1226.00

Transaction ID : BDC038C33E4D04ED5BE2

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. DAWSON, KEVIN, , ,**

Mailing Address 427 SHEPHERD ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

City  
WASHINGTONState  
DCZip Code  
20011-5943

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

608.10

Transaction ID : B5D8FB8A12B7541E6B97

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

4931.63

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

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

PAGE 86 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. KNOEDLER, MATTHEW, , ,**

Mailing Address 9340 CLOCKTOWER PL

City  
FAIRFAXState  
VAZip Code  
22031-1226Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

832.92

Transaction ID : BF449FB8EE191441DAFB

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. BREWER, MELANIE, A, ,**

Mailing Address 3921 SASSAFRAS ST

City  
ERIEState  
PAZip Code  
16508-3047Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1971.85

Transaction ID : B0EB89EA0C6C84C6ABB2

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. RITCHIE, QUINN, FAULKNER, ,**

Mailing Address 4424 7TH ST N

City  
ARLINGTONState  
VAZip Code  
22203-2001Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

292.76

Transaction ID : B20F9D11F4D494B58BE3

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

0.00

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

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

PAGE 87 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. ARISTOTLE INTERNATIONAL, INC.**

Mailing Address PO BOX 716045

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2025

City  
PHILADELPHIAState  
PAZip Code  
19171

FEC Identification Number

C

Purpose of Disbursement  
SOFTWARE SERVICE

001

Amount of Each Disbursement this Period

2385.00

Transaction ID : B03DB26FF0E1A473D94D

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. GUSTO**

Mailing Address 525 20TH S

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City  
SAN FRANCISCOState  
CAZip Code  
94107

FEC Identification Number

C

Purpose of Disbursement  
NET PAYROLL- SEE MEMOS

001

Amount of Each Disbursement this Period

4841.47

Transaction ID : BF3D382766CA9444E944

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. FULLER, PATRICK, , ,**

Mailing Address 804 WYOMING AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City  
ERIEState  
PAZip Code  
16505-3832

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Amount of Each Disbursement this Period

1225.92

Transaction ID : B575632FCEE62419E8B0

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

7226.47

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

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

PAGE 88 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. DAWSON, KEVIN, , ,**

Mailing Address 427 SHEPHERD ST NW

City  
WASHINGTONState  
DCZip Code  
20011-5943Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

608.09

Transaction ID : B227B6FD62B1C4A7193F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. KNOEDLER, MATTHEW, , ,**

Mailing Address 9340 CLOCKTOWER PL

City  
FAIRFAXState  
VAZip Code  
22031-1226Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

832.92

Transaction ID : BEFDF274B45E04F5289F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. BREWER, MELANIE, A, ,**

Mailing Address 3921 SASSAFRAS ST

City  
ERIEState  
PAZip Code  
16508-3047Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1971.77

Transaction ID : B743C3EF7AF614E9FB5E

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

0.00

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

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

PAGE 89 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. RITCHIE, QUINN, FAULKNER, ,**

Mailing Address 4424 7TH ST N

City  
ARLINGTONState  
VAZip Code  
22203-2001Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

202.77

Transaction ID : BA2BC515880C746D2B0E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

0.00

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

128037.69

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

PAGE 90 OF 94

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

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NAME OF COMMITTEE (In Full)

**MIKE KELLY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VENANGO COUNTY COUNCIL OF REPUBLICAN WOMEN**

Mailing Address 215 SENECA ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2025

City  
OIL CITYState  
PAZip Code  
16301-1303

FEC Identification Number

**C**Purpose of Disbursement  
VOID CHECK ISSUED 4/25/22

011

Amount of Each Disbursement this Period

- 40.00

Transaction ID : BB8A2D950766E4723A11

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. LECOM STUDENT SCHOLARSHIP FUND**

Mailing Address 1858 WEST GRANDVIEW BOULEVARD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2025

City  
ERIEState  
PAZip Code  
16509

FEC Identification Number

**C**Purpose of Disbursement  
CHARITABLE CONTRIBUTION

012

Amount of Each Disbursement this Period

400.00

Transaction ID : BC5702BC501EC4E42867

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. LECOM STUDENT SCHOLARSHIP FUND**

Mailing Address 1858 WEST GRANDVIEW BOULEVARD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2025

City  
ERIEState  
PAZip Code  
16509

FEC Identification Number

**C**Purpose of Disbursement  
CHARITABLE CONTRIBUTION

012

Amount of Each Disbursement this Period

5000.00

Transaction ID : B3A7A24116FC54EE1971

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

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

5360.00

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

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

PAGE 91 OF 94

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

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NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. LADY LIBERTY PARTNERS**

Mailing Address PO BOX 2142

Date of Disbursement

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

City  
CRANBERRY TOWNSHIPState  
PAZip Code  
16066-1142

FEC Identification Number

C

Purpose of Disbursement  
CHARITABLE CONTRIBUTION

012

Amount of Each Disbursement this Period

500.00

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

Transaction ID : BAB73923549CA479F900

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO ELECT ERIC MIKOVCH JUDGE**

Mailing Address 2402 W 8TH ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	0	/	2	0	2	5

City  
ERIEState  
PAZip Code  
16505-4444

FEC Identification Number

C

Purpose of Disbursement  
VOID CHECK ISSUED 4/20/23

011

Amount of Each Disbursement this Period

- 250.00

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2024

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

Transaction ID : BF1CA84D526ED416F852

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. MERCER COUNTY REPUBLICAN COMMITTEE**

Mailing Address 309 HILLCREST CIR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	2	5

City  
GROVE CITYState  
PAZip Code  
16127-1705

FEC Identification Number

C

Purpose of Disbursement  
NONFEDERAL CONTRIBUTION

011

Amount of Each Disbursement this Period

500.00

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

Transaction ID : B3FAE3BFE09D947D38A0

☐ Memo Item

State:

District:

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

750.00

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

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

PAGE 92 OF 94

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

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)

MIKE KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF MARCI MUSTELLO**

Mailing Address 202 BELLEFIELD DRIVE

City  
BUTLERState  
PAZip Code  
16001Purpose of Disbursement  
VOID CHECK ISSUED 3/13/20

011

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

- 2500.00

Transaction ID : B73846955103E4D988AC

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LAWRENCE COUNTY REPUBLICAN COMMITTEE**

Mailing Address 3015 WILMINGTON ROAD

City  
NEW CASTLEState  
PAZip Code  
16105Purpose of Disbursement  
NONFEDERAL CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B1D20937072684812957

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

- 2000.00

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

4110.00

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

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

NAME OF COMMITTEE (In Full)

Transaction ID : CDB9ED6986AAF4519861

MIKE KELLY FOR CONGRESS

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

☐ Memo Item

Election: 2010

☐ Primary☒ General☐ Other (specify) ▼

KELLY, GEORGE, J, , JR

Mailing Address

239 W PEARL ST

City

BUTLER

State

PA

ZIP Code

16001-4267

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

10000.00

Balance Outstanding at Close of This Period

90000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
05 07 / 2010M M / D D / Y Y Y Y  
12 31 / 2050

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).....▶

90000.00

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

90000.00

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 94 OF 94

FOR LINE NUMBER:  
(check only one)

☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

MIKE KELLY FOR CONGRESS

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

ARISTOTLE INTERNATIONAL, INC.

Nature of Debt (Purpose):

SOFTWARE SERVICE

Mailing Address PO BOX 716045

City

PHILADELPHIA

State

PA

Zip Code

19171

Outstanding Balance Beginning This Period

2385.00

Transaction ID : DDA94F67354AF4987A90

Amount Incurred This Period

0.00

Payment This Period

2385.00

Outstanding Balance at Close of This Period

0.00

B. 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

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) .....

0.00

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

0.00

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) .....