



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Chip Roy 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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	- 17.56	582609.56
(b) Total Contribution Refunds (from Line 20(d)) .....	25.00	114125.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	- 42.56	468484.56
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	27756.38	717733.46
(b) Total Offsets to Operating Expenditures (from Line 14) .....	1933.92	4210.95
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	25822.46	713522.51
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>237984.60</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0.00</b>	

**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

Chip Roy for Congress

Report Covering the Period: From:  /  /  To:  /  /

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).....	0.00	281175.19
(ii) Unitemized.....	- 17.56	239434.37
(iii) TOTAL of contributions from individuals ▶	- 17.56	520609.56
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	62000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	- 17.56	582609.56
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	245859.45
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.).....	1933.92	4210.95
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1916.36	832679.96

**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.....	27756.38	717733.46
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 .....	25.00	111625.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	25.00	114125.00
21. OTHER DISBURSEMENTS .....	2000000.00	2116874.17
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	2027781.38	2948732.63

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2263849.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1916.36
25. SUBTOTAL (add Line 23 and Line 24).....	2265765.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2027781.38
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	237984.60

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 20  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**Chip Roy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

FEC ID number of contributing federal political committee.

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  
10 / 08 / 2025

Transaction ID : SA.1461

Amount of Each Receipt this Period

Memo Item  
REFUND- TRAVEL

**B.** Full Name (Last, First, Middle Initial)  
SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

FEC ID number of contributing federal political committee.

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  
10 / 08 / 2025

Transaction ID : SA.1462

Amount of Each Receipt this Period

Memo Item  
REFUND- TRAVEL

**C.** Full Name (Last, First, Middle Initial)  
SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235

FEC ID number of contributing federal political committee.

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  
10 / 09 / 2025

Transaction ID : SA.1463

Amount of Each Receipt this Period

Memo Item  
REFUND- TRAVEL

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**SOUTHWEST AIRLINES**

Mailing Address **2702 LOVE FIELD DRIVE**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75235</b>
-----------------------	--------------------	--------------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1933.92**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		09		2025

**Transaction ID : SA.1464**

Amount of Each Receipt this Period  

473.48
--------

Memo Item  
**REFUND- TRAVEL**

**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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period  

--

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	473.48
<b>TOTAL</b> This Period (last page this line number only).....▶	1933.92

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

**A. KAPWING PRO PLAN**

Full Name (Last, First, Middle Initial)  
Mailing Address 1762 DOLORES STREET

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement SUBSCRIPTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 03 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 24.00

Transaction ID : SB.31

Memo Item

**B. DIALPAD INC**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 CALIFORNIA STREET SUITE

City SAN FRANCISCO State CA Zip Code 94111

Purpose of Disbursement TELEPHONE SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 20.00

Transaction ID : SB.32

Memo Item

**C. WE THE PIZZA**

Full Name (Last, First, Middle Initial)  
Mailing Address 305 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 16 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 126.14

Transaction ID : SB.15

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 170.14

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial)

**A. AMAZON**

Mailing Address 410 TERRY AVE

City SEATTLE State WA Zip Code 98109

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 113.60

Transaction ID : SB.27

Memo Item

Full Name (Last, First, Middle Initial)

**B. TRUIST BANK**

Mailing Address 2200 WILSON BLVD STE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB.1

Memo Item

Full Name (Last, First, Middle Initial)

**C. TRUIST BANK**

Mailing Address 2200 WILSON BLVD STE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 35.00

Transaction ID : SB.2

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 348.60

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial)  
**A. COMPLIANCE CONSULTING CO OF VA LLC**

Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 11800.00

Transaction ID : SB.8

Memo Item

Full Name (Last, First, Middle Initial)  
**B. TALAY THAI RESTAURANT**

Mailing Address 406 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 59.28

Transaction ID : SB.16

Memo Item

Full Name (Last, First, Middle Initial)  
**C. WINRED TECHNICAL SERVICES LLC**

Mailing Address 1776 WILSON BLVD SUITE 530

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 05 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 39.00

Transaction ID : SB.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 11898.28

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 20			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial) <b>A. THOMAS GRAPHICS INC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2025
Mailing Address PO BOX 142226		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78714
Purpose of Disbursement PRINTING		Amount of Each Disbursement this Period 1565.30
Candidate Name		Transaction ID : SB.7
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2025
Mailing Address 300 FIRST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD/BEVERAGES		Amount of Each Disbursement this Period 731.30
Candidate Name		Transaction ID : SB.17
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GUAPO'S</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2025
Mailing Address 4028 CAMPBELL AVENUE		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement FOOD/BEVERAGES		Amount of Each Disbursement this Period 40.84
Candidate Name		Transaction ID : SB.18
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2337.44
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 20			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial) <b>A. GUAPO'S</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2025
Mailing Address 4028 CAMPBELL AVENUE		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement FOOD/BEVERAGES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 122.82	
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 : SB.19
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. MICROSOFT STORE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2025
Mailing Address ONE MICROSOFT WAY		FEC Identification Number C
City REDMOND	State WA	Zip Code 98052
Purpose of Disbursement EQUIPMENT/SOFTWARE PURCHASE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 140.71	
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 : SB.11
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. COMPLIANCE CONSULTING CO OF VA LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2025
Mailing Address PO BOX 365		FEC Identification Number C
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement COMPLIANCE CONSULTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2950.00	
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 : SB.9
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3213.53
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial)

**A. LAZ PARKING**

Mailing Address 2000 M STREET NW SUITE 500

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 30.00

Transaction ID : SB.33

Memo Item

Full Name (Last, First, Middle Initial)

**B. PIECE OUT DEL RAY**

Mailing Address 2419 MT VERNON AVE

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 56.62

Transaction ID : SB.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. TRUIST BANK**

Mailing Address 2200 WILSON BLVD STE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB.3

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 101.62

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial)  
**A. COLONIAL PARKING**

Mailing Address 1050 THOMAS JEFFERSON STREET NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 32.00

Transaction ID : SB.34

Memo Item

Full Name (Last, First, Middle Initial)  
**B. HOUSE GIFT SHOP**

Mailing Address FIRST STREET NE

City WASHINGTON State DC Zip Code 20515

Purpose of Disbursement OFFICE SUPPLIES- PENS/PAPER/GIFTS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 665.00

Transaction ID : SB.29

Memo Item

Full Name (Last, First, Middle Initial)  
**C. OLD EBBITT GRILL**

Mailing Address 675 15TH STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 107.87

Transaction ID : SB.13

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 804.87

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial) <b>A. OLD EBBITT GRILL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2025	
Mailing Address 675 15TH STREET NW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20005	Amount of Each Disbursement this Period 122.22	
Purpose of Disbursement FOOD/BEVERAGES		Category/ Type	Transaction ID : SB.14	
Candidate Name		Memo Item <input type="checkbox"/>		
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>B. GUAPO'S</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2025	
Mailing Address 4028 CAMPBELL AVENUE			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 151.89	
Purpose of Disbursement FOOD/BEVERAGES		Category/ Type	Transaction ID : SB.21	
Candidate Name		Memo Item <input type="checkbox"/>		
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>C. TRUIST BANK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2025	
Mailing Address 2200 WILSON BLVD STE 100			FEC Identification Number C	
City ARLINGTON	State VA	Zip Code 22201	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement BANK FEE		Category/ Type	Transaction ID : SB.4	
Candidate Name		Memo Item <input type="checkbox"/>		
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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	474.11
<b>TOTAL</b> 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 Page

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial) <b>A. 7-11</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 613 CONGRESS AVENUE		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78701
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 5.09
Candidate Name		Transaction ID : SB.38
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) ▼	<input type="checkbox"/> Memo Item
State:      District:		

Full Name (Last, First, Middle Initial) <b>B. MURPHY'S GRAND IRISH PUB</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 713 KING STREET		FEC Identification Number C
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement FOOD/BEVERAGES		Amount of Each Disbursement this Period 131.54
Candidate Name		Transaction ID : SB.22
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) ▼	<input type="checkbox"/> Memo Item
State:      District:		

Full Name (Last, First, Middle Initial) <b>C. SHELL OIL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 900 N I-35		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78701
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 3.17
Candidate Name		Transaction ID : SB.37
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) ▼	<input type="checkbox"/> Memo Item
State:      District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	139.80
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial) <b>A. ROY, CHIP, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2025
Mailing Address 6705 W HIGHWAY 290 SUITE 50295		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78735
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1051.44	
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 : SB.39
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AVIS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2025
Mailing Address 3400 E SKY BLVD		FEC Identification Number C
City PHOENIX	State AZ	Zip Code 85034
Purpose of Disbursement TRAVEL	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1051.44	
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 : SBUV.34
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. TARGET HEADQUARTERS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2025
Mailing Address 1000 NICOLLET MALL		FEC Identification Number C
City MINNEAPOLIS	State MN	Zip Code 55403
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 53.39	
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 : SB.28
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1104.83
<b>TOTAL</b> 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 Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial)  
**A. LANDINI BROTHERS RESTURANT**

Mailing Address 115 KING STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 18 / 2025

FEC Identification Number: **C**

Amount of Each Disbursement this Period: 991.12

Transaction ID : **SB.12**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. RUTHIES ALL DAY**

Mailing Address 3411 5TH ST S

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 22 / 2025

FEC Identification Number: **C**

Amount of Each Disbursement this Period: 65.27

Transaction ID : **SB.25**

Memo Item

Full Name (Last, First, Middle Initial)  
**C. THOMAS GRAPHICS INC**

Mailing Address PO BOX 142226

City AUSTIN State TX Zip Code 78714

Purpose of Disbursement PRINTING/POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
12 / 22 / 2025

FEC Identification Number: **C**

Amount of Each Disbursement this Period: 5059.00

Transaction ID : **SB.30**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 6115.39

**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 Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial)

**A. TRUIST BANK**

Mailing Address 2200 WILSON BLVD STE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB.5

Memo Item

Full Name (Last, First, Middle Initial)

**B. TRUIST BANK**

Mailing Address 2200 WILSON BLVD STE 100

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB.6

Memo Item

Full Name (Last, First, Middle Initial)

**C. GRISTMILL RIVER RESTAURANT & BAR**

Mailing Address 1287 GRUENE ROAD

City NEW BRAUNFELS State TX Zip Code 78130

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 23 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 262.56

Transaction ID : SB.26

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 477.56

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 20	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2025
Mailing Address 200 VESEY STREET		FEC Identification Number C
City NEW YORK	State NY	Zip Code 10285
Purpose of Disbursement CREDIT CARD PAYMENT		Amount of Each Disbursement this Period 504.89
Candidate Name		Transaction ID : SB.44
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HERTZ CORPORATION</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2025
Mailing Address 8501 WILLIAMS ROAD		FEC Identification Number C
City ESTERO	State FL	Zip Code 33928
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 504.89
Candidate Name		Transaction ID : SB.45
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Transaction ID
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	504.89
<b>TOTAL</b> This Period (last page this line number only).....▶	27691.06

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 20	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Chip Roy for Congress**

Full Name (Last, First, Middle Initial) <b>A. TEXANS FOR CHIP ROY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address 7415 SW PARKWAY BLDG 6 STE 500-134		FEC Identification Number C
City AUSTIN	State TX	Zip Code 78735
Purpose of Disbursement CONTRIBUTION NON-FEDERAL		Amount of Each Disbursement this Period 2000000.00
Candidate Name		Transaction ID : SB.41
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2000000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2000000.00