

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

GOOD FOR CONGRESS

ADDRESS (number and street)

PO BOX 117

Check if different
than previously
reported. (ACC)

LOVINGSTON

VA

22949-0117

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00721308

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

VA

05

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
04 / 01 / 2026

through

M M / D D / Y Y Y Y
06 / 30 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer DOLAN, DAVID, , ,

Signature of Treasurer

DOLAN, DAVID, , ,

Date

M M / D D / Y Y Y Y
07 / 14 / 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

GOOD FOR CONGRESS

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	331.00	29574.48
(b) Total Contribution Refunds (from Line 20(d))	0.00	12200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	331.00	17374.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7419.16	32755.79
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	2729.36
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7419.16	30026.43
8. Cash on Hand at Close of Reporting Period (from Line 27)	6428.31	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	27523.42	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

GOOD FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 30 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

301.00

8243.00

(ii) Unitemized

30.00

2531.48

(iii) TOTAL of contributions
from individuals ▶

331.00

10774.48

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

18800.00

(d) The Candidate

0.00

0.00

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

331.00

29574.48

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

3083.05

13. LOANS:

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

0.00

10000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

10000.00

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

0.00

2729.36

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

0.00

50.00

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

331.00

45436.89

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.....	7419.16	32755.79
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	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	12000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	12200.00
21. OTHER DISBURSEMENTS	0.00	6165.75
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	7419.16	51121.54

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	13516.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	331.00
25. SUBTOTAL (add Line 23 and Line 24).....	13847.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7419.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6428.31

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

PAGE 5 OF 11

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

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

NAME OF COMMITTEE (In Full)

GOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

BETHKE, PAUL, A., ,

A.

Mailing Address 276 JEFFERSON DR

City

PALMYRA

State

VA

Zip Code

22963

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 ▼

304.10

Date of Receipt

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

Transaction ID : AD77AE2D0A1C04DB19B3

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DIXON, MARIAN, , ,

B.

Mailing Address 720 MEGAN LN

City

SHIPMAN

State

VA

Zip Code

22971

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 ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 14 2026

Transaction ID : AF9AD2D2C0EDB40D5952

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DIXON, MARIAN, , ,

C.

Mailing Address 720 MEGAN LN

City

SHIPMAN

State

VA

Zip Code

22971

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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 14 2026

Transaction ID : AE2F608154CA944A48CC

Amount of Each Receipt this Period

25.00

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

250.00

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 6 OF 11

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

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NAME OF COMMITTEE (In Full)

GOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

DIXON, MARIAN, , ,

A.

Mailing Address 720 MEGAN LN

City

SHIPMAN

State

VA

Zip Code

22971

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 14 2026

Transaction ID : A78330EB8ABD74A448CE

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

VASSAR, JOHN, D., ,

B.

Mailing Address 107 EMELINE DR

City

LYNCHBURG

State

VA

Zip Code

24502

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 ▼

334.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 17 2026

Transaction ID : A48BCC3BCBF3C4871AED

Amount of Each Receipt this Period

13.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VASSAR, JOHN, D., ,

C.

Mailing Address 107 EMELINE DR

City

LYNCHBURG

State

VA

Zip Code

24502

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 ▼

347.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 17 2026

Transaction ID : AC4E68FEC57EB4D7D8C5

Amount of Each Receipt this Period

13.00

☐ Memo Item

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

51.00

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

301.00

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

PAGE 7 OF 11

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

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NAME OF COMMITTEE (In Full)

GOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ARISTOTLE INTERNATIONAL, INC.

Mailing Address 205 PENNSYLVANIA AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2026

City
WASHINGTONState
DCZip Code
20003-1164

FEC Identification Number

C

Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

600.00

Transaction ID : B5E99EB124AD848DC8EB

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. DROPBOX, INC.Mailing Address 185 BERRY ST
FL 4

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2026

City
SAN FRANCISCOState
CAZip Code
94107-5705

FEC Identification Number

C

Purpose of Disbursement
SOFTWARE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

199.00

Transaction ID : BA552EE4F341F465D9D2

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. HAMMOND & ASSOCIATES

Mailing Address PO BOX 368

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2026

City
FALLS CHURCHState
VAZip Code
22040-0368

FEC Identification Number

C

Purpose of Disbursement
FUNDRAISING SERVICES

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : BEF68F769F1754859BE2

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

2299.00

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

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

PAGE 8 OF 11

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

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NAME OF COMMITTEE (In Full)

GOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. VALENTINE GROUPMailing Address 86 LAKESIDE VILLAS
E2City
VEGA ALTAState
PRZip Code
00692-8724Purpose of Disbursement
TEXT MESSAGING SERVICE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : BC365D5C4C2AC4B359DD

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ZOOM VIDEO COMMUNICATIONS

Mailing Address 55 ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-1608Purpose of Disbursement
CONFERENCING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.84

Transaction ID : BEFEE7EBDACBC449D90F

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ZOOM VIDEO COMMUNICATIONS

Mailing Address 55 ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-1608Purpose of Disbursement
CONFERENCING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.84

Transaction ID : BA613F60F02704944BC9

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

5035.68

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

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

PAGE 9 OF 11

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

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NAME OF COMMITTEE (In Full)

GOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ZOOM VIDEO COMMUNICATIONS

Mailing Address 55 ALMADEN BLVD

City
SAN JOSEState
CAZip Code
95113-1608Purpose of Disbursement
CONFERENCING

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

17.84

Transaction ID : BEF3BDD4EC66044EC92E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ 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:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ 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).....▶

17.84

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

7352.52

SCHEDULE C (FEC Form 3)
LOANS

PAGE 10 OF 11

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

NAME OF COMMITTEE (In Full)

Transaction ID : C9508F20268414585BB2

GOOD FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

GOOD, ROBERT, G., ,

Mailing Address

PO BOX 117

City

LOVINGSTON

State

VA

ZIP Code

22949-0117

☐ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 27 / 2025M M / D D / Y Y Y Y
10 08 / 2027

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).....▶

10000.00

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

10000.00

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 11 OF 11

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

NAME OF COMMITTEE (In Full)

GOOD FOR CONGRESS

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

HAMMOND & ASSOCIATES

Nature of Debt (Purpose):

FUNDRAISING SERVICES

Mailing Address PO BOX 368

City

FALLS CHURCH

State

VA

Zip Code

22040-0368

Outstanding Balance Beginning This Period

1500.00

Transaction ID : DDB941409487E4689803

Amount Incurred This Period

0.00

Payment This Period

1500.00

Outstanding Balance at Close of This Period

0.00

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

VALENTINE GROUP

Nature of Debt (Purpose):

TEXT MESSAGING SERVICE

Mailing Address 86 LAKESIDE VILLAS
E2

City

VEGA ALTA

State

PR

Zip Code

00692-8724

Outstanding Balance Beginning This Period

22523.42

Transaction ID : DACA67FA5994A49A7945

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

17523.42

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)

17523.42

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

17523.42

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

10000.00

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

27523.42