

**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

FALLON FOR CONGRESS

ADDRESS (number and street)

PO BOX 614



Check if different than previously reported. (ACC)

CELINA

TX

75009

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00750307

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

STATE ▼ DISTRICT

TX

04

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 / 2024

through

M M / D D / Y Y Y Y

06 / 30 / 2024

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 KILGORE, PAUL, , ,

Signature of Treasurer

KILGORE, PAUL, , ,

Date

M M / D D / Y Y Y Y

06 / 13 / 2025

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

FALLON FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2024

To:

MM / DD / YYYY
06 / 30 / 2024

	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))	83368.25	454511.66
(b) Total Contribution Refunds (from Line 20(d))	6600.00	11600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	76768.25	442911.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	49767.15	276218.53
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	422.18
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	49767.15	275796.35
8. Cash on Hand at Close of Reporting Period (from Line 27)	564500.37	
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)	25000.00	

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

FALLON FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2024

To:

MM / DD / YYYY
06 / 30 / 2024**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).....

53492.25

237956.75

(ii) Unitemized

776.00

6905.13

(iii) TOTAL of contributions
from individuals ▶

54268.25

244861.88

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

29100.00

209649.78

(d) The Candidate

0.00

0.00

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

83368.25

454511.66

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

30179.89

170891.67

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.)

0.00

422.18

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)..... ▶

113548.14

625825.51

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.....	49767.15	276218.53
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	6600.00	11600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	6600.00	11600.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	56367.15	287818.53

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	507319.38
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	113548.14
25. SUBTOTAL (add Line 23 and Line 24).....	620867.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	56367.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	564500.37

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 43

<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	

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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

AUSTIN, DUSTIN, , ,

A.

Mailing Address 700 W HARWOOD DR, STE G-2

City
HURSTState
TXZip Code
76054-3315FEC ID number of contributing
federal political committee.

C

Name of Employer
OUR COUNTRY HOMESOccupation
INFORMATION REQUESTED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 26 2024

Transaction ID : A03B397E42AF446A7A9B

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHENG, PAUL, , ,

B.

Mailing Address 6002 ROSE GROVE CT

City
DALLASState
TXZip Code
75248-2182FEC ID number of contributing
federal political committee.

C

Name of Employer
RAVALEN DEVELOPMENT LLCOccupation
INVESTOR MANAGEMENT

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 25 2024

Transaction ID : AB3E4748E7F2D4722B2D

Amount of Each Receipt this Period

450.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DYMENT, MICHAEL, , ,

C.

Mailing Address 1042 BROOK VALLEY LN

City
MC LEANState
VAZip Code
22102-1532FEC ID number of contributing
federal political committee.

C

Name of Employer
NEXAOccupation
ENGINEER

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 21 2024

Transaction ID : A9F6B0E1B02CB48D893C

Amount of Each Receipt this Period

1100.00

☐ Memo Item

4050.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

FIELDS, JACK, , ,

A. Mailing Address 1518 BEACHTOWN DRIVECity
GALVESTONState
TXZip Code
77550-3498FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2024

Transaction ID : AD777EB8B65CA4B82A0A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GIBLIN, CHRISTOPHER, , ,

B. Mailing Address 1304 CHANCEL PLCity
ALEXANDRIAState
VAZip Code
22314-4707FEC ID number of contributing
federal political committee.

C

Name of Employer
OGROccupation
GOVERNMENT RELATIONS

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 18 2024

Transaction ID : ADC435FE43D664717916

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GLENDENNING, REX, , ,

C. Mailing Address 13267 FM 428City
CELINAState
TXZip Code
75009-5551FEC ID number of contributing
federal political committee.

C

Name of Employer
REX REAL ESTATEOccupation
BROKER/OWNER

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 25 2024

Transaction ID : A2A8C0714CB3C4391A95

Amount of Each Receipt this Period

5000.00

☐ Memo Item

6500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

GLEN DENNING, REX, , ,

A.

Mailing Address 13267 FM 428

City

CELINA

State

TX

Zip Code

75009-5551

FEC ID number of contributing
federal political committee.

C

Name of Employer
REX REAL ESTATEOccupation
BROKER/OWNER

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 25 2024

Transaction ID : A88E75E4E137D441D9B4

Amount of Each Receipt this Period

- 1700.00

☒ Memo Item

REATTRIBUTION FROM

Full Name (Last, First, Middle Initial)

GLEN DENNING, SHERESE, , ,

B.

Mailing Address 13267 WEST FM 428

City

CELINA

State

TX

Zip Code

75009-5551

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
FARMER

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 25 2024

Transaction ID : AB08745A2B96C4245A7E

Amount of Each Receipt this Period

1700.00

☒ Memo Item

REATTRIBUTION TO

Full Name (Last, First, Middle Initial)

GOODFELLOW, GERALD, , ,

C.

Mailing Address 345 BRINGIER PLACE

City

SHREVEPORT

State

LA

Zip Code

71106-8392

FEC ID number of contributing
federal political committee.

C

Name of Employer
SMALL BUSINESS CONSULTING CORPORATOccupation
CEO

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 21 2024

Transaction ID : A3DF30886494E4CC1858

Amount of Each Receipt this Period

1100.00

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

1100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

HALL, KRISTI, , ,

A.

Mailing Address 3716 COLGATE

City

DALLAS

State

TX

Zip Code

75225-5119

FEC ID number of contributing
federal political committee.

C

Name of Employer
SUNOCO LPOccupation
DISPATCH COORDINATOR

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		26		2024

Transaction ID : A689B865C3F5149569CA

Amount of Each Receipt this Period

1700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HALL, WALLACE, , ,

B.

Mailing Address 3716 COLGATE

City

DALLAS

State

TX

Zip Code

75225-5119

FEC ID number of contributing
federal political committee.

C

Name of Employer
WETLAND PARTNERSOccupation
PRESIDENT

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		26		2024

Transaction ID : ADF37D95EF81748B4997

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUTCHINSON, JOHN, , ,

C.

Mailing Address 5055 KELLER SPRINGS ROAD

City

ADDISON

State

TX

Zip Code

75001-5997

FEC ID number of contributing
federal political committee.

C

Name of Employer
TREZ CAPITALOccupation
CO-CHIEF EXECUTIVE OFFICER AND GLOB

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		26		2024

Transaction ID : AC94AC49ACC9F4F58944

Amount of Each Receipt this Period

3000.00

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

8000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

KEISEL, JD, , ,

A.

Mailing Address 2221 MANANA DR #110

City

DALLAS

State

TX

Zip Code

75220-7119

FEC ID number of contributing
federal political committee.

C

Name of Employer

KC CONSTRUCTION SERVICES

Occupation

CEO

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	4

Transaction ID : AE530624DF57A44EAA50

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KIRAN, MATTHEW, , ,

B.

Mailing Address 980 BROADMOOR LANE

City

PROSPER

State

TX

Zip Code

75078-8964

FEC ID number of contributing
federal political committee.

C

Name of Employer

TALMADGE TINSLEY COMPANY

Occupation

REAL ESTATE AGENT

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A5A39FA6E812548CAAB3

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAVEY, CALEB, , ,

C.

Mailing Address 7129 MIMOSA LANE

City

DALLAS

State

TX

Zip Code

75230-5441

FEC ID number of contributing
federal political committee.

C

Name of Employer

REX REAL ESTATE

Occupation

REAL ESTATE AGENT

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A8DE86BBE43B140B5B0C

Amount of Each Receipt this Period

2500.00

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

4250.00

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

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

PAGE 10 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

LIECHTY, LORNE, , ,

A.

Mailing Address 502 TERRY LANE

City
HEATHState
TXZip Code
75032-8810FEC ID number of contributing
federal political committee.

C

Name of Employer
LORNE LIECHTY PCOccupation
ATTORNEY

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 26 2024

Transaction ID : A5B52B4D6FC954342B3A

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MAGNO, ROY, , ,

B.

Mailing Address 1443 FALLS RD

City
COPPELLState
TXZip Code
75019-3621FEC ID number of contributing
federal political committee.

C

Name of Employer
T WILSONOccupation
COO

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 26 2024

Transaction ID : ABF3D4C5C4BF84EFD8FA

Amount of Each Receipt this Period

3297.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MAGNO, ROY, , ,

C.

Mailing Address 1443 FALLS RD

City
COPPELLState
TXZip Code
75019-3621FEC ID number of contributing
federal political committee.

C

Name of Employer
T WILSONOccupation
COO

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 26 2024

Transaction ID : A734A470A02094D70982

Amount of Each Receipt this Period

3.00

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

5300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

MALONE, JOSH, , ,

A.

Mailing Address 228 WEST WINDSOR AVENUE

City

ALEXANDRIA

State

VA

Zip Code

22301-1518

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	2	4

Transaction ID : A498E363B2355422C870

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MIKULEC, KIRK, , ,

B.

Mailing Address 5925 CYPRESS COVE DRIVE

City

THE COLONY

State

TX

Zip Code

75056-3690

FEC ID number of contributing
federal political committee.

C

Name of Employer

NIDEC INDUSTRIAL

Occupation

SALES

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

368.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	4

Transaction ID : A7467D83B947D4B15A12

Amount of Each Receipt this Period

105.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MILLER, VAUGHN, , ,

C.

Mailing Address 1388 DUTCH HOLLOW DRIVE

City

FRISCO

State

TX

Zip Code

75033-0576

FEC ID number of contributing
federal political committee.

C

Name of Employer

VCM DEVELOPMENT

Occupation

COMMERCIAL REAL ESTATE DEVELOPER

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	2	4

Transaction ID : A61EAF873A26340139C2

Amount of Each Receipt this Period

1000.00

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

4405.00

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:		PAGE 12 OF 43	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial) MOORE, WESLEY, , ,			Date of Receipt M M / D D / Y Y Y Y Y 04 / 29 / 2024	
Mailing Address 6413 SHORELINE DRIVE			Transaction ID : A77470F470E8248649E7	
City LITTLE ELM	State TX	Zip Code 75068-3120	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Memo Item RECEIVED THROUGH CONDUIT WINRED, LIMIT NOT AFFECTED		
Name of Employer TFR ADVISORS		Occupation FINANCIAL CONSULTANT		
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 800.00		

Full Name (Last, First, Middle Initial) MOORE, WESLEY, , ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 29 / 2024	
Mailing Address 6413 SHORELINE DRIVE			Transaction ID : A3914F931A5484E0FAF5	
City LITTLE ELM	State TX	Zip Code 75068-3120	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Memo Item RECEIVED THROUGH CONDUIT WINRED, LIMIT NOT AFFECTED		
Name of Employer TFR ADVISORS		Occupation FINANCIAL CONSULTANT		
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 850.00		

Full Name (Last, First, Middle Initial) MOORE, WESLEY, , ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 29 / 2024	
Mailing Address 6413 SHORELINE DRIVE			Transaction ID : AFA13E046797A43AE9DA	
City LITTLE ELM	State TX	Zip Code 75068-3120	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Memo Item RECEIVED THROUGH CONDUIT WINRED, LIMIT NOT AFFECTED		
Name of Employer TFR ADVISORS		Occupation FINANCIAL CONSULTANT		
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 900.00		

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

PENZ, WILLIAM, , ,

A.

Mailing Address 6307 PINTAIL LN

City

FRISCO

State

TX

Zip Code

75034-2290

FEC ID number of contributing
federal political committee.

C

Name of Employer

RODMAN EXCAVATION

Occupation

VP

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : AEA9B5485416B4D81824

Amount of Each Receipt this Period

10000.00

☐ Memo Item

REFUNDED 20240709

Full Name (Last, First, Middle Initial)

PHILLIPS, BRADFORD, , ,

B.

Mailing Address 5515 LOBELLO DRIVE

City

DALLAS

State

TX

Zip Code

75229-5520

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIBERTY BANKERS

Occupation

CHIEF EXECUTIVE OFFICER & CHAIRMAN C

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A96DF7090E1154E4184D

Amount of Each Receipt this Period

5000.00

☐ Memo Item

1700 REFUNDED 20241016

Full Name (Last, First, Middle Initial)

SHEPARD, JARED, , ,

C.

Mailing Address 603 BROCKMAN COURT

City

GREAT FALLS

State

VA

Zip Code

22066-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer

HYPORI

Occupation

CEO

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

519.25

Date of Receipt

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

Transaction ID : A4F102BFD2DD3443CAA2

Amount of Each Receipt this Period

519.25

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

15519.25

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

SWICK, JOHN, , ,

A.

Mailing Address 7812 WOODSTONE LN

City

DALLAS

State

TX

Zip Code

75248-5352

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1318.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	4

Transaction ID : A4BDF178F536C4FED8A9

Amount of Each Receipt this Period

1318.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WILSON, KIRK, , ,

B.

Mailing Address 10739 BRIDGE HOLLOW COURT

City

DALLAS

State

TX

Zip Code

75229

FEC ID number of contributing
federal political committee.

C

Name of Employer

T WILSON ASSOCIATES

Occupation

PRESIDENT

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5800.00

Date of Receipt

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

Transaction ID : AE04384254E44452C878

Amount of Each Receipt this Period

2900.00

☐ Memo Item

REFUNDED 20241016

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
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

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

4218.00

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

53492.25

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 15 OF 43	
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial) BOAT OWNERS ASSOCIATION OF THE UNITED STATES (BOAT/US) POLITICAL ACTION COMMITTEE			Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2024
Mailing Address 880 S PICKETT STREET			Transaction ID : A36EB33CB0A3141B6A1C
City ALEXANDRIA	State VA	Zip Code 22304	
FEC ID number of contributing federal political committee. C C00160812			Amount of Each Receipt this Period 1000.00
Name of Employer		Occupation	<input type="checkbox"/> Memo Item
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) BULLDOG PAC			Date of Receipt M M / D D / Y Y Y Y Y 04 / 26 / 2024
Mailing Address PO BOX 6687			Transaction ID : A76BD2D28D6BC46CEBF2
City LUBBOCK	State TX	Zip Code 79493	
FEC ID number of contributing federal political committee. C C00672733			Amount of Each Receipt this Period 2000.00
Name of Employer		Occupation	<input type="checkbox"/> Memo Item
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2024
Mailing Address PO BOX 9891			Transaction ID : A84EF215869044C55A37
City ARLINGTON	State VA	Zip Code 22219	
FEC ID number of contributing federal political committee. C C00694323			Amount of Each Receipt this Period 211.61
Name of Employer		Occupation	<input checked="" type="checkbox"/> Memo Item CONTRIBUTIONS RECEIVED THROUGH CONDUIT, LIMIT NOT AFFECTED
Receipt For: 2024 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 0.00	

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

FALLON FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		31		2024

Transaction ID : AB65BCE05B9E84E5AB74

Amount of Each Receipt this Period

236.41

☒ Memo ItemCONTRIBUTIONS RECEIVED THROUGH CONDUIT,
LIMIT NOT AFFECTEDFull Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2024

Transaction ID : A9C68CB0D1D154D66B0A

Amount of Each Receipt this Period

124.98

☒ Memo ItemCONTRIBUTIONS RECEIVED THROUGH CONDUIT,
LIMIT NOT AFFECTEDFull Name (Last, First, Middle Initial)
DENBURY RESOURCES

Mailing Address 5320 LEGACY DR

City
PLANOState
TXZip Code
75024FEC ID number of contributing
federal political committee.**C** C00440651

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		29		2024

Transaction ID : A9509E1014FD74978A9A

Amount of Each Receipt this Period

1000.00

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

1000.00

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

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

PAGE 17 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

EMPLOYEES OF RTX CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1000 WILSON BOULEVARD

City
ARLINGTONState
VAZip Code
22209FEC ID number of contributing
federal political committee.**C** C00097568

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A4816BC469DA74DE4BF1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ERICSSON INC. U.S. EMPLOYEES POLITICAL ACTION COMMITTEE ('ERICSSON PAC')Mailing Address 1776 I STREET NW
SUITE 240City
WASHINGTONState
DCZip Code
20006FEC ID number of contributing
federal political committee.**C** C00568410

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	4

Transaction ID : AB5B5AD43815F4E0B8FE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRIENDS FOR CHRIS STEWART, INC.

Mailing Address 610 S BOULEVARD

City
TAMPAState
FLZip Code
33606FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

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

Transaction ID : A1DD52480537E4512BE6

Amount of Each Receipt this Period

1100.00

☐ 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 RECEIPTSUse 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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEEMailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WESTCity
WASHINGTONState
DCZip Code
20001FEC ID number of contributing
federal political committee.**C** C00096156

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		29		2024

Transaction ID : A2652738CB7424BD5883

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEEMailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WESTCity
WASHINGTONState
DCZip Code
20001FEC ID number of contributing
federal political committee.**C** C00096156

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		29		2024

Transaction ID : ACAA9177C94BF4B6795B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HOUSE CONSERVATIVES FUND

Mailing Address 228 S. WASHINGTON ST., STE. 115

City
ALEXANDRIAState
VAZip Code
22314FEC ID number of contributing
federal political committee.**C** C00326439

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		26		2024

Transaction ID : A0990A3C56C6747F7879

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 RECEIPTSUse 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
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

HUCK PAC

A.

Mailing Address PO BOX 2008

City

LITTLE ROCK

State

AR

Zip Code

72203

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

C00448373

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A347EFD1BC3B44984A78

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUNTINGTON INGALLS INDUSTRIES, INC. EMPLOYEES POLITICAL ACTION COMMITTEE (HIIPAC)

B.

Mailing Address 2451 CRYSTAL DRIVE, SUITE 1100

City

ARLINGTON

State

VA

Zip Code

22202

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

C00325092

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	4

Transaction ID : A141C35F556C4472DA7E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INDEPENDENT ELECTRICAL CONTRACTORS INC PAC (IEC PRIDE PAC)

C.Mailing Address 2900 SOUTH QUINCY STREET
SUITE 720

City

ARLINGTON

State

VA

Zip Code

22206

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

C00332031

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	2	4

Transaction ID : A7F901FD13CB640228FC

Amount of Each Receipt this Period

1000.00

☐ Memo Item

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION COMMITTEE

Mailing Address 122 UPTOWN DR SUITE 300

City
BAY CITYState
MIZip Code
48708FEC ID number of contributing
federal political committee.**C** C00384354

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		29		2024

Transaction ID : A49FE5C307A3644A7908

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL AUTOMOBILE DEALERS ASSOCIATION PAC

Mailing Address 412 FIRST ST.

City
WASHINGTONState
DCZip Code
20003FEC ID number of contributing
federal political committee.**C** C00040998

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		26		2024

Transaction ID : A91B2D989A4D84BFC85F

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL FEDERATION OF INDEPENDENT BUSINESS

Mailing Address 555 12TH ST NW, SUITE 1001

City
WASHINGTONState
DCZip Code
20004FEC ID number of contributing
federal political committee.**C** C70006432

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		30		2024

Transaction ID : A7633ECB7B1834E3090A

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 RECEIPTSUse 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
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

POLITICAL ACTION COMMITTEE OF THE AAOS**A.**

Mailing Address 317 MASSACHUSETTS AVE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.**C** C00343137

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A9A8167D5C73749489AE

Amount of Each Receipt this Period

1500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

ROLLS-ROYCE NORTH AMERICA HOLDINGS INC. PAC (ROLLS-ROYCE NORTH AMERICA PAC)

Mailing Address 1900 RESTON METRO PLAZA
SUITE 400

City

RESTON

State

VA

Zip Code

20190

FEC ID number of contributing
federal political committee.**C** C00296822

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	4

Transaction ID : AFC1D65A1055546FD926

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SEAL PAC

Mailing Address 29243 ST. JUST DRIVE

City

UNIONVILLE

State

VA

Zip Code

22567

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

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	4

Transaction ID : AD61ECE11888D4B75973

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 RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 43

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

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NAME OF COMMITTEE (In Full)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

TENASKA INC EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 14302 FNB PARKWAY

City

OMAHA

State

NE

Zip Code

68154

FEC ID number of contributing
federal political committee.**C** C00479998

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	2	4

Transaction ID : AC5E9845C5AB74204A1F

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TEXAS INSTRUMENTS INCORPORATED POLITICAL ACTION COMMITTEE (TI PAC)Mailing Address 12500 TI BOULEVARD
MS8656

City

DALLAS

State

TX

Zip Code

75243

FEC ID number of contributing
federal political committee.**C** C00007070

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	4

Transaction ID : AAED358D11F2847C3A34

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TEXTRON INC. POLITICAL ACTION COMMITTEE

Mailing Address 40 WESTMINSTER STREET

City

PROVIDENCE

State

RI

Zip Code

02903

FEC ID number of contributing
federal political committee.**C** C00123612

Name of Employer

Occupation

Receipt For: 2024

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	4

Transaction ID : A1E40BDC61CAA423DB9D

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).....▶

29100.00

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

PAGE 23 OF 43

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

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NAME OF COMMITTEE (In Full)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

FALLON VICTORY FUND

A.Mailing Address 555 METRO PLACE S
STE. 525City
DUBLINState
OHZip Code
43017FEC ID number of contributing
federal political committee.**C** C00765552

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

170891.67

Date of Receipt

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

Transaction ID : A8B798103E2E64E79B74

Amount of Each Receipt this Period

30179.89

☐ Memo Item
JFC TRANSFER

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

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

30179.89

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

30179.89

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

PAGE 24 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. 814 CONSULTING

Mailing Address 5827 COLFAX AVE

City
ALEXANDRIAState
VAZip Code
22311Purpose of Disbursement
FUNDRAISING SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		2	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

81.04

Transaction ID : B578CEEC3CE7343E3B28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4255 AMON CARTER BLVD

City
FT. WORTHState
TXZip Code
76155Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1763.84

Transaction ID : B054F092C4EDF409C875

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 1340 POYDRAS ST

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		3	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

627.21

Transaction ID : BB15FA5E7B6E244B1910

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

2472.09

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 25 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ASCENT CAMPAIGN STRATEGIES

Mailing Address 10748 EDEN ROC DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	4

City
DALLASState
TXZip Code
75238

FEC Identification Number

C

Purpose of Disbursement
FUNDRAISING SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : BEA66A52507A04B1FA2E

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

B. ASCENT CAMPAIGN STRATEGIES

Mailing Address 10748 EDEN ROC DR

Date of Disbursement

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

City
DALLASState
TXZip Code
75238

FEC Identification Number

C

Purpose of Disbursement
DIGITAL SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B3585FBE4DCDF48C89FB

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

C. ASCENT CAMPAIGN STRATEGIES

Mailing Address 10748 EDEN ROC DR

Date of Disbursement

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

City
DALLASState
TXZip Code
75238

FEC Identification Number

C

Purpose of Disbursement
FUNDRAISING SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B378E18066016458194B

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

6000.00

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 26 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ASCENT CAMPAIGN STRATEGIES

Mailing Address 10748 EDEN ROC DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2024

City
DALLASState
TXZip Code
75238

FEC Identification Number

C

Purpose of Disbursement
FUNDRAISING SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

8300.00

Transaction ID : BC933F0DB694F4A96A10

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

B. ASCENT CAMPAIGN STRATEGIES

Mailing Address 10748 EDEN ROC DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		27		2024

City
DALLASState
TXZip Code
75238

FEC Identification Number

C

Purpose of Disbursement
FUNDRAISING SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4000.00

Transaction ID : B2C4E260AE83242D39B8

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

C. AX CAPITAL

Mailing Address 555 METRO PLACE N

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		13		2024

City
DUBLINState
OHZip Code
43017

FEC Identification Number

C

Purpose of Disbursement
ACCOUNTING & COMPLIANCE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3000.00

Transaction ID : BFCC2C34D1A2446F99CE

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

15300.00

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 27 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AX CAPITAL

Mailing Address 555 METRO PLACE N

City
DUBLINState
OHZip Code
43017Purpose of Disbursement
ACCOUNTING & COMPLIANCE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		2	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

3200.00

Transaction ID : BC404D74D47744C0386B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITAL GRILLE

Mailing Address 601 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
MEALS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	4		0	4		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

825.00

Transaction ID : B9CFF85850C424EE89A5

☐ 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
MEALS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	4		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

166.29

Transaction ID : BC999009D54F84E02A46

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

4191.29

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 28 OF 43

<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)

FALLON 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
MEALS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

83.02

Transaction ID : B16F1FAEE25C9455B8F9

☐ 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
MEALS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		1	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

141.93

Transaction ID : B7BAF72C820E141DBB35

☐ 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
MEALS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		2	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

62.84

Transaction ID : BE04755DAA2014D68A12

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

287.79

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 29 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CATCH DIGITAL STRATEGY

Mailing Address 2714 WASHINGTON STREET

City
GREENVILLEState
TXZip Code
75401Purpose of Disbursement
DIGITAL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	4		1	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

3611.84

Transaction ID : B40674ACAA3584DD0B5F

☐ Memo Item**B. CATCH DIGITAL STRATEGY**

Mailing Address 2714 WASHINGTON STREET

City
GREENVILLEState
TXZip Code
75401Purpose of Disbursement
DIGITAL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		1	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2688.40

Transaction ID : B7B016E5D0AC44919B2B

☐ Memo Item**C. CATCH DIGITAL STRATEGY**

Mailing Address 2714 WASHINGTON STREET

City
GREENVILLEState
TXZip Code
75401Purpose of Disbursement
DIGITAL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		1	2		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2834.87

Transaction ID : B7FCE44ACE02040E3BFD

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

9135.11

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

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

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<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DROPBOX

Mailing Address 1800 OWENS ST

City
SAN FRANCISCOState
CAZip Code
94158Purpose of Disbursement
DATABASE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		2	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

19.99

Transaction ID : B90020C59B2724B6AAD1

☐ Memo Item**B. EXPEDIA**

Mailing Address 333 108TH AVE NE

City
BELLEVUEState
WAZip Code
98004Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

211.40

Transaction ID : B48263FF9C9444382B28

☐ Memo Item**C. FALLON, PATRICK, , ,**

Mailing Address 3876 SHADY CREEK CT

City
FRISCOState
TXZip Code
75033-2896Purpose of Disbursement
REIMBURSEMENT PLANE TICKETS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

544.90

Transaction ID : B9B3C5EA0AFE04961A79

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

776.29

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

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

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<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HANNAN, VIRGINIA, , ,

Mailing Address 109 DREW LANE

City
HEATHState
TXZip Code
75032-8829Purpose of Disbursement
CONTRACTOR FIELD STAFF

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	4		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : BB4B6D070872548B8BE6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HOPKINS COUNTY REPUBLICAN PARTY

Mailing Address 403 GILMER STREET

City
SULPHUR SPRINGSState
TXZip Code
75482Purpose of Disbursement
EVENT TICKETS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		1	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : BB317FFD42B464A8CBA4

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARRIOTT

Mailing Address 7750 WISCONSIN AVE

City
BETHESDAState
MDZip Code
20814Purpose of Disbursement
MEALS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

6.00

Transaction ID : B1DBD5EBCF9444B65A44

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

356.00

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 32 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MARIOTT

Mailing Address 7750 WISCONSIN AVE

City
BETHESDAState
MDZip Code
20814Purpose of Disbursement
TRAVEL ROOM EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

498.10

Transaction ID : BB686C1FAA88F48A9A57

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NORTH TEXAS PRINT SOLUTIONS

Mailing Address 2077 SWITZER RD

City
SANGERState
TXZip Code
76266Purpose of Disbursement
PRINT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		3	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

210.59

Transaction ID : B9C44C34068AE4C17B87

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NORTH TEXAS PRINT SOLUTIONS

Mailing Address 2077 SWITZER RD

City
SANGERState
TXZip Code
76266Purpose of Disbursement
PRINT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

223.75

Transaction ID : BF7DC13C9FD7F4D388D6

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

932.44

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

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

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<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PATRIOT PROMOTIONSMailing Address 431 N GRAHAM ST
#286City
STEPHENVILLEState
TXZip Code
76401-3504Purpose of Disbursement
GIFTS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	4		1	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1289.88

Transaction ID : BDDC18DCEFCA44529AB6

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PATRIOT PROMOTIONSMailing Address 431 N GRAHAM ST
#286City
STEPHENVILLEState
TXZip Code
76401-3504Purpose of Disbursement
GIFTS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		1	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2798.26

Transaction ID : B0E6F8C969C33466EBF1

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SIMIEN, ERIK, , ,

Mailing Address 6600 MCKINNEY RANCH

City
MCKINNEYState
TXZip Code
75070-8265Purpose of Disbursement
CONTRACTOR FIELD STAFF

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	4		2	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B106EADD43B16464387C

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

4188.14

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

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

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<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SIMIEN, ERIK, , ,

Mailing Address 6600 MCKINNEY RANCH

Date of Disbursement

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

City
MCKINNEYState
TXZip Code
75070-8265

FEC Identification Number

C

Purpose of Disbursement
CONTRACTOR FIELD STAFF

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

100.00

Transaction ID : B5BC190A9807B463684B

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

B. SIMIEN, ERIK, , ,

Mailing Address 6600 MCKINNEY RANCH

Date of Disbursement

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

City
MCKINNEYState
TXZip Code
75070-8265

FEC Identification Number

C

Purpose of Disbursement
CONTRACTOR FIELD STAFF

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

100.00

Transaction ID : B9EB78B1508E54B8AAC4

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

C. SIMIEN, ERIK, , ,

Mailing Address 6600 MCKINNEY RANCH

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	2	4

City
MCKINNEYState
TXZip Code
75070-8265

FEC Identification Number

C

Purpose of Disbursement
CONTRACTOR FIELD STAFF

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

100.00

Transaction ID : BD25FB1F9ABB34E99802

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

300.00

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 35 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SIMIEN, ERIK, , ,

Mailing Address 6600 MCKINNEY RANCH

City
MCKINNEYState
TXZip Code
75070-8265Purpose of Disbursement
CONTRACTOR FIELD STAFF

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B6750187D5F184D44B71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SIMIEN, ERIK, , ,

Mailing Address 6600 MCKINNEY RANCH

City
MCKINNEYState
TXZip Code
75070-8265Purpose of Disbursement
CONTRACTOR FIELD STAFF

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : BB29B3A5C9DB344F0AEE

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SIMIEN, ERIK, , ,

Mailing Address 6600 MCKINNEY RANCH

City
MCKINNEYState
TXZip Code
75070-8265Purpose of Disbursement
CONTRACTOR FIELD STAFF

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		2	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B11C178F449CE4F3482A

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

300.00

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)

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<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SMAJLI, MARIO, , ,

Mailing Address 1422 MURPHY DR

City
ROCKWALLState
TXZip Code
75087-4644

Purpose of Disbursement

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	6		1	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B80E6271A4F754AA9ABC

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SORRELL, SHANNAN, , ,

Mailing Address 302 CATLIN CIRCLE

City
HIGHLAND VILLAGEState
TXZip Code
75077-6777

Purpose of Disbursement

CAMPAIGN CONSULTING SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	4		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : BB419E89D269B442CAF8

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City
DALLASState
TXZip Code
75235

Purpose of Disbursement

TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		1	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

8.00

Transaction ID : B19B8276726A64C0F921

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

2408.00

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)

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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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City
DALLASState
TXZip Code
75235Purpose of Disbursement
MEALS

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

5.60

Transaction ID : BE5CEE94279B64745823

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TEAM RONNY

Mailing Address PO BOX 51522

City
AMARILLOState
TXZip Code
79159Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		1	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B9B96425CD1F143E7983

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THE BEN HOTEL

Mailing Address 251 N NARCISSUS AVE

City
WEST PALM BEACHState
FLZip Code
33401Purpose of Disbursement
TRAVEL ROOM EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		0	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

992.14

Transaction ID : B98633F52A40543C7A6B

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

1997.74

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 38 OF 43

<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	4

City
SAN FRANCISCOState
CAZip Code
94103

FEC Identification Number

C

Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.14

Transaction ID : B772C1AABC883496AAB2

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET STREET

Date of Disbursement

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

City
SAN FRANCISCOState
CAZip Code
94103

FEC Identification Number

C

Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

45.20

Transaction ID : BEA405B98F3D14F91BF3

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	4

City
SAN FRANCISCOState
CAZip Code
94103

FEC Identification Number

C

Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

13.91

Transaction ID : BCB3F4B3C0EAB49658A9

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

84.25

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

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

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<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET STREET

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

10.78

Transaction ID : B6EBB3EE6E08146A98F2

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET STREET

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

3.44

Transaction ID : BA1F9FFA5E4904174B4A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1455 MARKET STREET

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

24.31

Transaction ID : BCFD3BDC55DC34A68B64

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

38.53

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

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

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<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 1455 MARKET STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	4

City
SAN FRANCISCOState
CAZip Code
94103

FEC Identification Number

C

Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

22.96

Transaction ID : B92E936B731B341E4B57

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

B. UBER

Mailing Address 1455 MARKET STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	4

City
SAN FRANCISCOState
CAZip Code
94103

FEC Identification Number

C

Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

21.93

Transaction ID : B0DF0A8C566FA4207B76

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

Full Name (Last, First, Middle Initial)

C. UNITED AIRLINES

Mailing Address 233 SOUTH WACKER DRIVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	4

City
CHICAGOState
ILZip Code
60606

FEC Identification Number

C

Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10.00

Transaction ID : B3845013393314A52B5A

☐ Memo Item

Office Sought:

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

Disbursement For: 2024

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

State:

District:

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

54.89

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

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

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<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)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED AIRLINES

Mailing Address 233 SOUTH WACKER DRIVE

City
CHICAGOState
ILZip Code
60606Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	8		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

24.00

Transaction ID : BE2E2B0AE721F4372B75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UPS STORE

Mailing Address 55 GLENLAKE PKWY NE

City
ATLANTAState
GAZip Code
30328Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

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

Disbursement For: 2024

<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
0	5		2	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

16.26

Transaction ID : BE461598B338F4090B73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

WINRED

Office Sought:

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

Disbursement For: 2024

<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
0	6		3	0		2	0	2	4

FEC Identification Number

C C00694323

Amount of Each Disbursement this Period

22.65

Transaction ID : BEF58A59CD31F407689C

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

62.91

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

48885.47

**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 43

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

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NAME OF COMMITTEE (In Full)

FALLON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FISHER, KENNETH, , ,

Mailing Address 1900 PRESTON RD

City
PLANOState
TXZip Code
75093-5175Purpose of Disbursement
REFUND

010

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2024

<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
0	6		1	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

3300.00

Transaction ID : BAA5129BFC63E4290B58

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FISHER, SHERRILYN, , ,

Mailing Address 1900 PRESTON RD

City
PLANOState
TXZip Code
75093-5175Purpose of Disbursement
REFUND

010

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2024

<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
0	6		1	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

3300.00

Transaction ID : BBDA6FD0A1C1A4421B89

☐ 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).....▶

6600.00

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

6600.00

SCHEDULE C (FEC Form 3)
LOANS

PAGE 43 OF 43

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
FALLON FOR CONGRESS

Transaction ID : C04E0A4F9BBE04A70ABC

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

Election: 2020

☐ Primary☐ General☒ Other (specify) ▼

OTHER _____

FALLON, PATRICK, , ,

Mailing Address

PO BOX 614

City

CELINA

State

TX

ZIP Code

75009-0614

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
07 31 / 2020M M / D D / Y Y Y Y
12 31 / 2020Y Y Y Y
2020

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).....▶

25000.00

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

25000.00

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