07/15/2025 08 : 03

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### FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	authorized Com	nmittee		(	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		kample: If typing, ver the lines.	type	12FE4M5	
SHREVE FOR CONC	GRESS			1 1 1	1 1 1 1 1	
ADDRESS (number and street)	PO BOX 17182	2				
▼ Check if different						
than previously reported. (ACC)	SOUTHPORT				LIN 4	6227
2. FEC IDENTIFICATION	NIIMDED W	CITY A		S	TATE A	ZIP CODE ▲
C C00870949	NOWIDER V	3. IS THIS REPORT	× NEW (N)	OR	AMENDE (A)	STATE ▼ DISTRICT  IN 06
4. TYPE OF REPORT (C  (a) Quarterly Reports:	Choose One)	(b) 12-Day <b>PRE</b>	E-Election Report	for the:		
April 15 Quarterly	, Papart (O1)		Primary (12P)		General (12	G) Runoff (12R)
			Convention (12	2C)	Special (129	5)
X July 15 Quarterly October 15 Quar		Election on	M M /	D D /	Y " Y " Y " Y	in the State of
January 31 Year-	End Report (YE)	(c) 30-Day <b>PO</b> \$	ST-Election Repo	rt for the:		
			General (30G)		Runoff (30R	Special (30S)
Termination Repo	ort (TER)	Election on	M M /	D D /	Y Y Y Y	in the State of
5. Covering Period	04 / D1D /	Y Y Y Y Y 2025	through	M M 06	/ 30 /	Y Y Y Y Y 2025
I certify that I have examined  Type or Print Name of Treasur	MADTINI KE	-	nowledge and be	elief it is tru	e, correct and	complete.
	IARTIN, KEVIN, , ,			Da	ate 07	/ 15 / Y Y Y Y Y Y 2025
NOTE: Submission of false, erro	neous, or incomple	te information may	subject the perso	on signing th	is 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

### SHREVE FOR CONGRESS

R	eport Covering the Period: From:	04 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M06 M / D30 / Y 2025 Y
		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))	60510.91	120321.64
	(b) Total Contribution Refunds (from Line 20(d))	1.75	1001.75
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	60509.16	119319.89
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	73718.82	226690.57
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.59	689.78
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	73718.23	226000.79
8.	Cash on Hand at Close of Reporting Period (from Line 27)	93163.12	
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	5900000.00	

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

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4).....

### SHREVE FOR CONGRESS

04 06 30 01 2025 2025 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 23500.00 39810.73 (i) Itemized (use Schedule A)...... 510.91 510.91 (ii) Unitemized..... (iii) TOTAL of contributions 24010.91 40321.64 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 36500.00 80000.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 60510.91 120321.64 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.59 689.78 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines

60511.50

121011.42

### **DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Disbursements

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date			
17.	OPERATING EXPENDITURES	73718.82	226690.57			
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	1.75	1.75			
	(b) Political Party Committees	0.00	0.00			
	(c) Other Political Committees (such as PACs)	0.00	1000.00			
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	1.75	1001.75			
1.	OTHER DISBURSEMENTS	0.00	0.00			
2.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	73720.57	227692.32			
	III. CASH SU	JMMARY				
3.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	106372.19			
4	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	60511.50			
5.	SUBTOTAL (add Line 23 and Line 24)		166883.69			
6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	73720.57			
7.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	93163.12			

## ITE

FOR LINE NUMBER:

PAGE

OF

62

THEOLE A (FEC FOIII 3)	Use separate schedule(s)	(check only one)			
EMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b		11d 14	15
y information copied from such Reports and Statements m	nay not be sold or used by any p	erson for the purpos	se of solicitir	ng contrib	utions

An۱ 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) ARBACH, MICHAEL, , , Date of Receipt Mailing Address 1900 W LAWRENCE AVE **APT 205** 2025 27 City State Zip Code Transaction ID: A9409F949289D49B9B41 IL 60640 **CHICAGO** FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation **RETIRED** RETIRED Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) GOODRICH, CHARLES, D.,, Date of Receipt Mailing Address 5015 NIGHTSHADE LN 2025 06 24 City State Zip Code Transaction ID: ACB59C2A8EB0E4900A8E **NOBLESVILLE** IN 46062-9818 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 3500.00 Name of Employer Occupation PRESIDENT CEO **GAYLOR ELECTRIC** Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 3500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) HERSHMAN, BRANDT, , , Date of Receipt Mailing Address 6142 MADERIA LN 06 11 2025 City State Zip Code Transaction ID: A15C70011D0DD4C8AB1C IN **LAFAYETTE** 47905-8259 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **ATTY** BARNES AND THORNBURG Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 250.00 Other (specify) 4250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

federal political committee.

Name of Employer

ARROWSMITH, LLC

Receipt For: 2026

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR I	PAGE	6	OF	62				
(check	c only o	ne)						
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П.	12	120		10h	۱,,	Γ	1.5	

Amount of Each Receipt this Period

Memo Item

-1000.00

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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) HODGE, JAMES, , , Date of Receipt Mailing Address 113 W WAYNE ST **APT 307** 2025 25 City State Zip Code Transaction ID: AC38FBD1FA42B4E29AFB IN 46802-2507 FORT WAYNE FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 3500.00 Name of Employer Occupation ARROWSMITH, LLC MONEY MANAGEMENT Memo Item Receipt For: 2026 Election Cycle-to-Date SEE REDESIGNATION Primary General 4500.00 Other (specify) Full Name (Last, First, Middle Initial) HODGE, JAMES, , , Date of Receipt Mailing Address 113 W WAYNE ST 05 25 2025 **APT 307** City State Zip Code Transaction ID: AB78BE81B5D3F46B0979 FORT WAYNE IN 46802-2507 FEC ID number of contributing

C

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

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

Occupation

MONEY MANAGEMENT

Election Cycle-to-Date

	Primary General  Other (specify) ▼	, ,	4500.00	REDESIGNATION FROM
C.	Full Name (Last, First, Middle Initial) HODGE, JAMES, , ,  Mailing Address 113 W WAYNE ST APT 307  City	State	Zip Code	Date of Receipt    M
	FEC ID number of contributing federal political committee.	C	46802-2507	Amount of Each Receipt this Period
	Name of Employer ARROWSMITH, LLC Receipt For: 2026	Occupation MONEY MANA		1000.00 × Memo Item
	Primary	Election Cycle	e-to-Date ▼ 4500.00	REDESIGNATION TO

3500.00

Use separate schedule(s) for each category of the

FOR LINE NUMBER:					PAGE		/	OF	(	52
(check only one)										
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	12		13a		13h		14			15

ITEMIZED RECEIPTS Detailed Summary Page 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) HUSTON, DANNY, , , Date of Receipt Mailing Address 616 W JACKSON ST 2025 30 City State Zip Code Transaction ID: A8512E768B4AF443D99C IN 47368-9524 PARKER CITY FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 3500.00 Name of Employer Occupation MOBILE AMUSEMENTS NORTH AMERICAN MIDWAY ENTERTAINMEN Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 3500.00 Other (specify) Full Name (Last, First, Middle Initial) KING, CHRISTOPHER, M.,, Date of Receipt Mailing Address 132 WEST WASHINGTON ST 2025 04 01 City State Zip Code Transaction ID: AF84E3D2434244901959 **SHELBYVILLE** IN 46176-1236 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation SURGE DEVELOPMENT **ENGINEER** Memo Item Receipt For: 2026 Election Cycle-to-Date > Primary General 1000.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) KING, CHRISTOPHER, M.,, Date of Receipt Mailing Address 132 WEST WASHINGTON ST 06 24 2025 City State Zip Code Transaction ID: ABA12EAA88599477B95A IN SHELBYVILLE 46176-1236 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation **ENGINEER** SURGE DEVELOPMENT Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 2000.00 Other (specify) 5500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

FOR LINE NUMBER: (check only one) Use separate schedule(s)

PAGE <sup>8</sup> OF 62

for each category of the X 11a 11b 11c 11d

	Detailed Summary Page	12 13a 13b 14 15		
		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS				
Full Name (Last, First, Middle Initial) MCAULEY, PATRICK, B., ,		Date of Receipt		
Mailing Address 5858 N COLLEGE AVE APT 223		06 24 2025		
City INDIANAPOLIS	State Zip Code IN 46220-3092	Transaction ID : A13D19D00EC4C49F695E		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
Name of Employer BROAD RIPPLE CAPITAL	Occupation ASSOCIATE	500.00		
Receipt For: 2026	Election Cycle-to-Date ▼ 500.00	Memo Item		
Full Name (Last, First, Middle Initial)  MCCANNELL, CHRIS, , ,		Date of Receipt		
Mailing Address 2100 11TH STREET NW  City	State Zip Code	06 28 2025		
WASHINGTON	DC 20001	Transaction ID : AB915A7A3D30449F08F0		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
Name of Employer GRAYROBINSON	Occupation DEPUTY MANAGING DIRECTOR	500.00		
Receipt For: 2026  ✓ Primary General  Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	EARMARKED (NON-DIRECTED) THROUGH WIN		
Full Name (Last, First, Middle Initial) WINRED		Date of Receipt		
Mailing Address PO BOX 9891		06 28 2025		
City ARLINGTON	State   Zip Code   VA   22219-1891	Transaction ID: A94650FCB08D84AAB9D9		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period		
Name of Employer	Occupation	500.00		
Receipt For: 2026	Election Cycle-to-Date  ▼	× Memo Item		
Primary General  Other (specify) ▼	4510.91	INTERMEDIARY  TOTAL EARMARKED THROUGH CONDUIT. PA		
		LIMIT NOT AFFECTED.		

Use separate schedule(s) for each category of the

FOR LINE	PAGE	9	OF	(	62			
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ITEMIZED RECEIPTS Detailed Summary Page 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) MCGRAW, CRAIG, , , Date of Receipt Mailing Address 523 APACHE TRL 2025 29 City State Zip Code Transaction ID: A7952F4B48532460EB52 NJ 07751-4632 MORGANVILLE FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 500.00 Name of Employer Occupation **VP SALES** TRANS AMERICAN TRUCKING Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary EARMARKED (NON-DIRECTED) THROUGH WINRED General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) WINRED Date of Receipt Mailing Address PO BOX 9891 2025 05 29 City State Zip Code Transaction ID: ADAB7B554B4DA4123891 **ARLINGTON** VA 22219-1891 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation × Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary INTERMEDIARY General 4510.91 Other (specify) ▼ TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) MILLER, CRYSTAL, , , Date of Receipt Mailing Address 637 ROUND HILL RD 06 17 2025 City State Zip Code Transaction ID: ADF4CB91D47B94FF7BD4 IN **INDIANAPOLIS** 46260 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation SENIOR VICE PRESIDENT **IU HEALTH** Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional).....

10 OF PAGE 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 11a 11b 11d 11c Detailed Summary Page 13a 13b 14

ITEMIZED RECEIPTS 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) MURPHY, KRISTEN, M.,, Date of Receipt Mailing Address 153383 WHISTLING LN 2025 30 City State Zip Code Transaction ID: AB6E5936F41654DBFBD5 IN 46033 WESTFIELD FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 250.00 Name of Employer Occupation **HOMEMAKER HOMEMAKER** Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) MUTZ, JOHN, , , Date of Receipt Mailing Address 8128 DEAN RD 2025 06 30 City State Zip Code Transaction ID: A53D6ACC45F784EA689D **INDIANAPOLIS** IN 46240-2918 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 3500.00 Name of Employer Occupation RETIRED RETIRED Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary General 3500.00 Other (specify)  $\blacktriangledown$ Full Name (Last, First, Middle Initial) RIETHMILLER, JOEL, , , Date of Receipt Mailing Address 400 MASSACHUSETTS AVENUE NW 1312 06 30 2025 City State Zip Code Transaction ID: AA1EA394870664B80834 DC WASHINGTON 20001 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation **CONSULTANT** IMPERIUM GLOBAL ADVISORS Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General EARMARKED (NON-DIRECTED) THROUGH WINRED 1000.00 Other (specify) 4750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) WINRED Date of Receipt Mailing Address PO BOX 9891 2025 30 City State Zip Code Transaction ID: ABFE7E81764AA4F91842 VA 22219-1891 ARLINGTON FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation × Memo Item Receipt For: 2026 Election Cycle-to-Date **INTERMEDIARY** Primary General 4510.91 Other (specify) TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED. Full Name (Last, First, Middle Initial) ROSE, DOUG, , , Date of Receipt Mailing Address 10550 HUSSEY LN 2025 06 10 City State Zip Code Transaction ID: A38C52DA170B9473CB00 **CARMEL** IN 46032 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 3500.00 Name of Employer Occupation IRWIN R. ROSE & CO., LLC REAL ESTATE INVESTMENTS Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary General 3500.00 Other (specify) ▼ Full Name (Last, First, Middle Initial) SCHMIDT, MELISSA, PROFFITT, , Date of Receipt Mailing Address 1 AMERICAN SQ STE 2900 04 29 2025 City State Zip Code Transaction ID: AEDA8D1AD2FB94CC9961 IN **INDIANAPOLIS** 46282-0019 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **ATTORNEY** ICE MILLER LLP Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 250.00 Other (specify) 3750.00 SUBTOTAL of Receipts This Page (optional)..... 23500.00 TOTAL This Period (last page this line number only).....

mage# 202507159762847561								
SCHEDULE A (FE ITEMIZED RECEIP	-	fo	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 12 OF 62 (check only one)  11a				
	such Reports and Statemen	•			•	•		
NAME OF COMMITTEE ( SHREVE FOR CO	In Full)		, , , , , , , , , , , , , , , , , , , ,					
Full Name (Last, First, Mi ALLY FINANCIAL INC				Date of Da				
Mailing Address 801 PEN	NSYLVANIA AVE NW		Date of Re		2025			
City WASHINGTON	State DC		Zip Code 20004-3655			703454952B32	<u>!</u>	
FEC ID number of contribution federal political committee	Ψ	C00579	540	Amount of	Each Receipt	this Period		
Name of Employer	Occup	oation		- Liii	7	1000.00		
Receipt For: 2026  Primary G  Other (specify) ▼	eneral	on Cycle-t	to-Date	Memo Item				
B. Full Name (Last, First, Mi AMERICAN HOSPITA Mailing Address 800 TEN	L ASSOCIATION PAC		Date of Re	eceipt	Y			
TWO CIT	YCENTER, SUITE 400	e l	Zip Code	06	30	2025	_	
WASHINGTON	DC		20001-5188	Transaction	ID : AAD50F05	5C65444862B34	4	
FEC ID number of contribution federal political committee	· , .	C001061	46	Amount of	Each Receipt		_	
Name of Employer	Occup	ation		T [	-	1000.00		
Receipt For: 2026  X Primary G Other (specify) ▼	eneral	on Cycle-t	to-Date ▼ 3500.00	Memo	) Item			
Full Name (Last, First, Mi COX ENTERPRISES	PAC (COXPAC) INC.			Date of Re	eceipt			
Mailing Address 975 F ST STE 300				04 /	11	2025		
City WASHINGTON	State DC		Zip Code 20004-1459	Transaction	ID : A4F245B6	D84A74BF2BE	≣3	
FEC ID number of contributing federal political committee.			653	Amount of	Each Receipt		_	
Name of Employer	Occup	ation			7	1000.00		
Receipt For: 2026  ☐ Primary ☐ General ☐ Other (specify) ▼			to-Date	Memo	) Item			

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

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

3000.00

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

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Detailed Summary Page			12		13a		13b		14		15
y not be sold or used by any person for the purpose of soliciting contributions								าร			

Any information copied from such Reports and Statements may 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) CUMMINS INC. PAC (CIPAC) Date of Receipt Mailing Address 601 PENNSYLVANIA AVE NW NORTH BUILDING SUITE 1100N 05 2025 21 City State Zip Code Transaction ID: AF29D2F2303F749789F5 DC 20004-2601 WASHINGTON FEC ID number of contributing Amount of Each Receipt this Period C00377952 federal political committee. 2500.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Primary X General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) DRIVE COMMITTEE - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION Date of Receipt Mailing Address 25 LOUISIANA AVE NW 2025 06 05 City State Zip Code Transaction ID: AF897B0C991814EBF8C9 WASHINGTON 20001-2130 DC FEC ID number of contributing C C00032979 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 3500.00 Other (specify)  $\blacktriangledown$ Full Name (Last, First, Middle Initial) ELANCO US INC. PAC ('ELANCO PAC') Date of Receipt Mailing Address 1801 PENNSYLVANIA AVE NW **STE 420** 05 13 2025 City State Zip Code Transaction ID: A05C4F6BAB25B40F99B7 DC WASHINGTON 20006-3606 FEC ID number of contributing C C00722165 Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 2500.00 Other (specify) 6000.00 SUBTOTAL of Receipts This Page (optional).....

14 OF PAGE 62 FOR LINE NUMBER: SCHEDULE A (FEC Form 3) (check only one) Use separate schedule(s) for each category of the |**X**|11c ITEMIZED RECEIPTS 11a 11b 11d Detailed Summary Page 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) ENERGY MARKETERS OF AMERICA SMALL BUSINESS COMMITTEE PAC (EMA SBC PAC) Date of Receipt Mailing Address 300 NEW JERSEY AVE NW STE 924 04 2025 29 City State Zip Code Transaction ID: AB19B16F2D36540038BD DC 20001-2030 WASHINGTON FEC ID number of contributing Amount of Each Receipt this Period C00035204 federal political committee. 1000.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) HONEYWELL INTERNATIONAL PAC Date of Receipt Mailing Address 101 CONSTITUTION AVE NW 04 2025 **STE 500** 29 City State Zip Code Transaction ID: AACDD47F5E9B44D83943 WASHINGTON DC 20001-2133 FEC ID number of contributing С C00096156 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary General 1000.00 Other (specify)  $\blacktriangledown$ Full Name (Last, First, Middle Initial) HONEYWELL INTERNATIONAL PAC Date of Receipt Mailing Address 101 CONSTITUTION AVE NW **STE 500** 06 30 2025 City State Zip Code Transaction ID: A9A41DFA2ED7E4EC6A65 DC WASHINGTON 20001-2133 FEC ID number of contributing C C00096156 Amount of Each Receipt this Period federal political committee. 2000.00 Occupation Name of Employer Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 3000.00 Other (specify) 4000.00 SUBTOTAL of Receipts This Page (optional).....

### SCHEDULE A (FEC F **ITEMIZED RECEIPTS**

mage# 202507159762847564			
SCHEDULE A (FEC Form 3)		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 OF 62 (check only one)  11a 11b X 11c 11d 11d 12 13a 13b 14 15
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.
SHREVE FOR CONGRESS			
Full Name (Last, First, Middle Initial)  ICE MILLER PAC  Mailing Address ONE AMERICAN SQUAR  SUITE 2900	RE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City INDIANAPOLIS	State IN	Zip Code 46282-0019	Transaction ID : AD2756759C4464F79995
FEC ID number of contributing federal political committee.	<b>C</b> coo	520973	Amount of Each Receipt this Period
Name of Employer  Receipt For: 2026  Primary General  Other (specify) ▼	Occupation  Election Cyc	cle-to-Date ▼	Memo Item
Full Name (Last, First, Middle Initial)  INTERNATIONAL COUNCIL OF SHO  Mailing Address 975 F ST NW	OPPING CENTER	RS INC PAC (ICSC PAC)	Date of Receipt
STE 560 City WASHINGTON	State DC	Zip Code 20004-1454	04 29 2025  Transaction ID : A0B14EACCCC1A4B26A2C
FEC ID number of contributing federal political committee.	C C002	217638	Amount of Each Receipt this Period
Name of Employer	Occupation		
Receipt For: 2026	Election Cy	cle-to-Date _	Memo Item

Receipt For: 2026  ☐ Primary ☐ General  Other (specify) ▼	Election Cyc	le-to-Date ▼ 1000.00	Memo Item
Full Name (Last, First, Middle Initial) KOCH, INC. PAC (KOCHPAC)  Mailing Address 4111 E 37TH ST N  City WICHITA	State KS	Zip Code 67220-3203	Date of Receipt    M
FEC ID number of contributing federal political committee.  Name of Employer	C C002	36489	Amount of Each Receipt this Period
Receipt For: 2026  ✓ Primary General  Other (specify) ▼	Election Cyc	le-to-Date ▼ 1000.00	Memo Item
SUBTOTAL of Receipts This Page (optional).	'	<b>&gt;</b>	3000.00

16 OF PAGE 62 FOR LINE NUMBER: SCHEDULE A (FEC Form 3) (check only one) Use separate schedule(s) for each category of the |**X**|11c ITEMIZED RECEIPTS 11a 11b 11d Detailed Summary Page 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC Date of Receipt Mailing Address 2121 CRYSTAL DR STE 100 2025 24 City State Zip Code Transaction ID: A88F5CC678D7A4069B34 VA 22202-3706 **ARLINGTON** FEC ID number of contributing Amount of Each Receipt this Period C00303024 federal political committee. 1000.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) MOTOROLA SOLUTIONS, INC. PAC Date of Receipt Mailing Address 601 PENNSYLVANIA AVE NW 2025 **STE 675** 04 29 City State Zip Code Transaction ID: AB1312A2E9CD545F1979 WASHINGTON DC 20004-2601 FEC ID number of contributing С C00075341 Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary General 1000.00 Other (specify)  $\blacktriangledown$ Full Name (Last, First, Middle Initial) NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC Date of Receipt Mailing Address 1325 MASSACHUSETTS AVE NW 06 04 2025 City State Zip Code Transaction ID: A14F3F2E9FFC1483BAD8 DC WASHINGTON 20005-4171 FEC ID number of contributing C C00238725 Amount of Each Receipt this Period federal political committee. 1000.00 Occupation Name of Employer Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 3000.00 Other (specify) 3000.00

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

PAGE 17 OF 62 FOR LINE NUMBER: SCHEDULE A (FEC Form 3) (check only one) Use separate schedule(s) for each category of the |**X**|11c ITEMIZED RECEIPTS 11a 11b 11d Detailed Summary Page 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) NATIONAL APARTMENT ASSOCIATION PAC Date of Receipt Mailing Address 4300 WILSON BLVD **STE 800** 05 2025 29 City State Zip Code Transaction ID: A340809A1D97E4F579F3 VA 22203-4213 **ARLINGTON** FEC ID number of contributing Amount of Each Receipt this Period C00113241 federal political committee. 1000.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF REALTORS PAC Date of Receipt Mailing Address 430 N MICHIGAN AVE 2025 05 07 City State Zip Code Transaction ID: A62A5FF7AC6E9402CB81 **CHICAGO** IL 60611-4011 FEC ID number of contributing C C00030718 Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date | Primary General 2000.00 Other (specify)  $\blacktriangledown$ Full Name (Last, First, Middle Initial) NATIONAL STAR ROUTE MAIL CONTRACTORS ASSOC. PAC - STAR PAC Date of Receipt Mailing Address 8521 LEESBURG PIKE **STE 350** 06 16 2025 City State Zip Code Transaction ID: AA33009AC327B4E08847 VA VIENNA 22182-2430 FEC ID number of contributing C C00163311 Amount of Each Receipt this Period federal political committee. 1000.00 Occupation Name of Employer Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 1000.00 Other (specify) 4000.00 SUBTOTAL of Receipts This Page (optional).....

			<u>,                                      </u>
SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 OF 62 (check only one)  11a 11b X 11c 11d 12 13a 13b 14 15
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS			
Full Name (Last, First, Middle Initial) NATIONAL STONE, SAND & GRAVEL A Mailing Address 66 CANAL CENTER PLZ STE 300 City ALEXANDRIA	ASSOCIATIO	Zip Code 22314-1576	Date of Receipt    M
FEC ID number of contributing federal political committee.		0089458	Amount of Each Receipt this Period  2500.00
Name of Employer  Receipt For: 2026  Primary General  Other (specify) ▼	Occupation  Election C	ycle-to-Date  2500.00	Memo Item
Full Name (Last, First, Middle Initial)  SEAL PAC SUPPORTING ELECTING A  Mailing Address 824 S MILLEDGE AVE, STE  City		EADERS PAC	Date of Receipt    M
ATHENS FEC ID number of contributing federal political committee.	GA COO	30606	Amount of Each Receipt this Period  1000.00
Name of Employer  Receipt For: 2024  Primary General  Other (specify) ▼	Occupation  Election C	ycle-to-Date  1000.00	Memo Item DEBT RETIREMENT
Full Name (Last, First, Middle Initial) THE AES CORPORATION PAC Mailing Address 4300 WILSON BLVD FL 11 City	State	Zip Code	Date of Receipt    M
ARLINGTON  FEC ID number of contributing federal political committee.	C CO	22203-4167 0507962	Amount of Each Receipt this Period
Name of Employer  Receipt For: 2026  ☐ Primary ☐ General  Other (specify) ▼	Occupation  Election C	n ycle-to-Date ▼ 1000.00	Memo Item
SUBTOTAL of Receipts This Page (optional)			4500.00

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

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

19 OF PAGE 62 FOR LINE NUMBER: (check only one) Use separate schedule(s) for each category of the |X|11c ITEMIZED RECEIPTS 11a 11b 11d Detailed Summary Page 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) TOYOTA MOTOR NORTH AMERICA, INC PAC (TOYOTA/LEXUS PAC) Date of Receipt Mailing Address 325 7TH ST NW STE 1000 05 2025 80 City State Zip Code Transaction ID: A9F8C56D829A844C9916 DC 20004-2801 WASHINGTON FEC ID number of contributing Amount of Each Receipt this Period C00542365 federal political committee. 1000.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) TRANSPORTATION INTERMEDIARIES ASSOCIATION'S TIAPAC Date of Receipt Mailing Address 1900 DUKE ST 2025 STE 300 05 21 City State Zip Code Transaction ID: AB8C6599BC0594B4F831 **ALEXANDRIA** VA 22314-3498 FEC ID number of contributing C C00335091 Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 2500.00 Other (specify)  $\blacktriangledown$ Full Name (Last, First, Middle Initial) TRANSPORTATION INTERMEDIARIES ASSOCIATION'S TIAPAC Date of Receipt Mailing Address 1900 DUKE ST **STE 300** 06 07 2025 City State Zip Code Transaction ID: A1E5DC6B1DC9949E384A VA **ALEXANDRIA** 22314-3498 FEC ID number of contributing C C00335091 Amount of Each Receipt this Period federal political committee. 1000.00 Occupation Name of Employer Memo Item Receipt For: 2026 Election Cycle-to-Date Primary General 3500.00 Other (specify)

4500.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 OF 62 (check only one)  11a 11b X 11c 11d 11d 12 13a 13b 14 15
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS		, , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) TRINITY INDUSTRIES EMPLOYEE PAC	(SF) INC.		Date of Receipt
Mailing Address 14221 DALLAS PKWY STE 1100			05 13 2025
City DALLAS	State TX	Zip Code 75254-2957	Transaction ID : AD8B020D772F74C55953
FEC ID number of contributing federal political committee.	C co	0268904	Amount of Each Receipt this Period
Name of Employer	Occupation	1	2000.00
Receipt For: 2026  Primary General  Other (specify) ▼	Election C	ycle-to-Date  2000.00	Memo Item
Full Name (Last, First, Middle Initial)  TRUCKING PAC OF THE AMERICAN T  Mailing Address 430 FIRST STREET SE  SUITE 100	RUCKING A	SSOCIATIONS INC.	Date of Receipt  M M M / D D / Y TY TY TY  06 30 2025
City WASHINGTON	State DC	Zip Code 20003-1826	Transaction ID : A28DDE173D1B14A09BB0
FEC ID number of contributing federal political committee.	C coo	0002881	Amount of Each Receipt this Period
Name of Employer	Occupation	1	1000.00
Receipt For: 2026  ☐ Primary ☐ General  Other (specify) ▼	Election C	ycle-to-Date   1000.00	Memo Item
Full Name (Last, First, Middle Initial) UNITED POSTMASTERS AND MANAGERS	OF AMERICA	A POLITICAL FUND - UPMA PAG	Date of Receipt
Mailing Address 8 HERBERT ST	Ctata	7:- 0.4-	06 30 / Y Y Y Y Y Y
City ALEXANDRIA	State VA	Zip Code 22305-2628	Transaction ID : A5164029E94724048A1C
FEC ID number of contributing federal political committee.	C co	0100404	Amount of Each Receipt this Period
Name of Employer	Occupation	1	1500.00
Receipt For: 2026  ✓ Primary General  Other (specify) ▼	Election C	ycle-to-Date   1500.00	Memo Item
			4500.00

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

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

36500.00

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 21 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. ADOBE 06 30 2025 Mailing Address 345 PARK AVE Zip Code City State **FEC Identification Number** CA SAN JOSE 95110-2704 Purpose of Disbursement OFFICE SUPPLIES 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 32.09 Office Sought: House Senate Primary General Transaction ID: B00FDB3068F5B4F83BA8 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B.** AMAZON Date of Disbursement Mailing Address 410 TERRY AVE N 2025 City State Zip Code **FEC Identification Number SEATTLE** WA 98109-5210 Purpose of Disbursement **OFFICE SUPPLIES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 22.46 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BDD3A8B782D26472394C Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. AMAZON Mailing Address 410 TERRY AVE N 05 09 2025 City State Zip Code **FEC Identification Number SEATTLE** 98109-5210 WA Purpose of Disbursement **OFFICE SUPPLIES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 5.03 Office Sought: House General Senate Primary Transaction ID: B7A958091DBA3465FB3E President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 59.58

President

District:

State:

PAGE 22 62 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. AMAZON 09 2025 Mailing Address 410 TERRY AVE N City State Zip Code **FEC Identification Number** WA **SEATTLE** 98109-5210 Purpose of Disbursement OFFICE SUPPLIES 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 13.90 Office Sought: House Senate Primary General Transaction ID: B959E8C239F104177955 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B.** AMAZON Date of Disbursement Mailing Address 410 TERRY AVE N 2025 05 City State Zip Code **FEC Identification Number SEATTLE** WA 98109-5210 Purpose of Disbursement **OFFICE SUPPLIES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 16.04 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B04B3D360B4CB4F60809 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. AMAZON Mailing Address 410 TERRY AVE N 05 09 2025 City State Zip Code **FEC Identification Number SEATTLE** 98109-5210 WA Purpose of Disbursement **OFFICE SUPPLIES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 8.55 Office Sought: House General Senate Primary Transaction ID: BFC14C27099A1425ABCB

Other (specify)

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

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

38.49

Memo Item

A. AMAZON

**SEATTLE** 

OFFICE SUPPLIES

Candidate Name

Office Sought:

**B.** AMAZON

**SEATTLE** 

**OFFICE SUPPLIES** 

Candidate Name

Office Sought:

State:

State:

City

City

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 23 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement 09 2025 Mailing Address 410 TERRY AVE N State Zip Code **FEC Identification Number** WA 98109-5210 Purpose of Disbursement 001 Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 10.69 House Senate Primary General Transaction ID: BE7D6EDFA4B86459AA91 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address 410 TERRY AVE N 2025 05 State Zip Code **FEC Identification Number** WA 98109-5210 Purpose of Disbursement 001 Amount of Each Disbursement this Period Category/ Type 35.30 Disbursement For: 2026 House Senate Primary General Transaction ID: B3E474C36E94F45099EC Other (specify) President Memo Item District: Date of Disbursement

Full Name (Last, First, Middle Initial)

District:

### C. ANEDOT, INC.

Mailing Address PO BOX 84314 City State Zip Code **BATON ROUGE** 70884-4314 LA Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Category/ Type Disbursement For: 2026 Office Sought: House General Senate Primary President Other (specify)

01

2025

**FEC Identification Number** 

Amount of Each Disbursement this Period

232.60 Transaction ID: B0B0BAF39D733467085D

Memo Item

04

SUBTOTAL of Disbursements This Page (optional)..... 278.59 TOTAL This Period (last page this line number only).....

## ITEMIZED DISBURSEMENTS

PAGE 24 62 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. ANEDOT, INC. 2025 07 Mailing Address PO BOX 84314 City State Zip Code **FEC Identification Number** LA **BATON ROUGE** 70884-4314 Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 40.30 Office Sought: House Senate Primary General Transaction ID: B8290275E3C304DD28F9 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. ANEDOT, INC. Date of Disbursement Mailing Address PO BOX 84314 2025 05 City State Zip Code **FEC Identification Number BATON ROUGE** ΙΑ 70884-4314 Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 140.30 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B2CB4DE09A75144588E4 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. ANEDOT, INC. Mailing Address PO BOX 84314 06 2025 City State Zip Code **FEC Identification Number BATON ROUGE** 70884-4314 LA Purpose of Disbursement **CREDIT CARD FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 140.30 Office Sought: House General Senate Primary Transaction ID: B801E1782CEBE4B6AADB President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 320.90

PAGE 25 OF 62 FOR LINE NUMBER: (check only one) Use separate schedule(s)

T	EMIZED DISBURSEMENTS		or each category etailed Summar		×	17 20a	18 20b		19a 20c	_	9b 1
	y information copied from such Reports and Statemer for commercial purposes, other than using the name										; —
$\rangle$	NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS										
Α.	Full Name (Last, First, Middle Initial)  ANEDOT, INC.  Mailing Address PO BOX 84314				Date 06		rsement	Υ	2025		
	City BATON ROUGE Purpose of Disbursement CREDIT CARD FEES  Candidate Name	ate A	Zip Code 70884-4314	001 Category/ Type	С		ation Numb	_	ent this P	eriod	
	President O State: District:	ent For: 2 rimary Other (spec	General			nsaction Memo Ite	<b>ID</b> : <b>B6674</b> l	DDF	10.30 <b>F3C3740</b>		12
В.	Full Name (Last, First, Middle Initial)  ANEDOT, INC.  Mailing Address PO BOX 84314				Date 06		rsement	Υ	y y y y 2025		
	BATON ROUGE  Purpose of Disbursement CREDIT CARD FEES  Candidate Name  Office Sought: House Senate President President State: District:	ent For: 2 rimary other (spec	General	001 Category/ Type	Amo	unt of Ea	ntion Numb nch Disburs D: B7434A m	eme	10.30	)	
C.	Full Name (Last, First, Middle Initial)  ARISTOTLE INTERNATIONAL, INC  Mailing Address PO BOX 716045	D				of Disbu			y y y y 2025	7	
	City Sta PHILADELPHIA F Purpose of Disbursement COMPLIANCE SOFTWARE Candidate Name  Office Sought: House Disburseme	ate PA ent For: 2	Zip Code 19171-6045	001 Category/ Type	Amo	unt of Ea	ation Numb	eme	2250.00	)	
		other (spec				Memo Ite	<b>D : B320C7</b> m	/5E	:7F3U45A	'3RD	5
	SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)				-	-		=	2270.60	)	]
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**PAGE** 26 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. ASPIRE JOHNSON COUNTY 2025 Mailing Address 1499 WINDHORST WAY 10 **STE 160** City State Zip Code **FEC Identification Number** IN **GREENWOOD** 46143-8800 Purpose of Disbursement **REGISTRATION FEE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 140.06 Office Sought: House Senate Primary General Transaction ID: B5EF59130A82D44F09E0 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. ASPIRE JOHNSON COUNTY Date of Disbursement Mailing Address 1499 WINDHORST WAY 2025 16 04 **STE 160** City State Zip Code **FEC Identification Number GREENWOOD** 46143-8800 Purpose of Disbursement **REGISTRATION FEE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 36.31 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B9E428DC4E828472CA0B Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. ASPIRE JOHNSON COUNTY Mailing Address 1499 WINDHORST WAY 05 20 2025 STE 160 City Zip Code State **FEC Identification Number GREENWOOD** 46143-8800 IN Purpose of Disbursement **REGISTRATION FEE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 186.75 Office Sought: House Senate Primary General Transaction ID: BFC05E7A8D00C4298951 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 363.12 TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	>	17	1	8		19a		]19b
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ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements may 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement BARTHOLOMEW COUNTY REPUBLICAN PARTY 05 2025 22 Mailing Address PO BOX 1723 Zip Code City State **FEC Identification Number** IN **COLUMBUS** 47202-1723 Purpose of Disbursement C **EVENT SPONSORSHIP** 001 Candidate Name Amount of Each Disbursement this Period Category/ BARTHOLOMEW COUNTY REPUBLICAN PARTY Type 500.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BCA889D691EC142668F7 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. BROGHAMER COMPLIANCE Date of Disbursement Mailing Address PO BOX 72100 2025 04 City Zip Code State **FEC Identification Number NEWPORT** KY 41072-0100 Purpose of Disbursement COMPLIANCE CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 2475.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BD2530E87222749D1A28 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. BROGHAMER COMPLIANCE Mailing Address PO BOX 72100 05 06 2025 City Zip Code State **FEC Identification Number NEWPORT** 41072-0100 KY Purpose of Disbursement **COMPLIANCE CONSULTING** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 2475.00 Office Sought: House Senate General Primary Transaction ID: BC9FBA0B9A4BB4F20A07 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 5450.00 TOTAL This Period (last page this line number only).....

PAGE 28 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) X 17 18 19a 20a 20b 20c

for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement BROGHAMER COMPLIANCE 2025 06 06 Mailing Address PO BOX 72100 City State Zip Code **FEC Identification Number** ΚY **NEWPORT** 41072-0100 Purpose of Disbursement C COMPLIANCE CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 2724.32 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BFC1F6103A79D4EFC96A Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. BULLFEATHERS Date of Disbursement Mailing Address 410 1ST ST SE 09 2025 06 City State Zip Code **FEC Identification Number** DC WASHINGTON 20003-1819 Purpose of Disbursement FOOD/BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 262.92 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B28BE512884D34468B8D Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. CAPITOL HILL CLUB Mailing Address 300 1ST ST SE 04 16 2025 City State Zip Code **FEC Identification Number** WASHINGTON DC 20003-1801 Purpose of Disbursement FOOD/BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 348.07 Office Sought: House Senate Primary General Transaction ID: B1BDC0EF40A5E4CEABC2 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 3335.31 TOTAL This Period (last page this line number only).....

PAGE 29 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. CAPITOL HILL CLUB 2025 06 Mailing Address 300 1ST ST SE City State Zip Code **FEC Identification Number** DC WASHINGTON 20003-1801 Purpose of Disbursement C FOOD/BEVERAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 500.98 Office Sought: House Senate Primary General Transaction ID: BEA17831B4D9647CEAE7 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B.** FEDEX CORPORATE Date of Disbursement Mailing Address 942 SHADY GROVE RD S 02 2025 06 City State Zip Code **FEC Identification Number MEMPHIS** TN 38120-4117 Purpose of Disbursement POSTAGE/SHIPPING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B710F8586D46B453C857 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HENRY COUNTY GOP OPEN Mailing Address PO BOX 668 06 06 2025 ATTN: REPUBLICAN CENTRAL COMMITTEE City Zip Code State **FEC Identification Number** 47362-0668 **NEW CASTLE** IN Purpose of Disbursement **EVENT SPONSORSHIP** 001 Candidate Name Amount of Each Disbursement this Period Category/ HENRY COUNTY GOP OPEN Type Disbursement For: 2026 300.00 Office Sought: House Senate Primary General Transaction ID: B1DC1329A534946FD885 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 822.59 TOTAL This Period (last page this line number only).....

### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 30 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

19b 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. HOLTKAMP, JOHN, , , 2025 Mailing Address PO BOX 17182 City State Zip Code **FEC Identification Number** IN SOUTHPORT 46227 Purpose of Disbursement C **EXPENSE REIMBURSEMENT - SEE MEMO** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 315.63 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B6334119FB1B44568822 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. HOLTKAMP, JOHN, , , Date of Disbursement Mailing Address PO BOX 17182 2025 03 City State Zip Code **FEC Identification Number** SOUTHPORT 46227 Purpose of Disbursement TRAVEL MILEAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 315.63 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BC1D69117CFC64A71A2C Other (specify) President × Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HOLTKAMP, JOHN, , , Mailing Address PO BOX 17182 04 2025 City State Zip Code **FEC Identification Number** SOUTHPORT IN 46227 Purpose of Disbursement **PAYROLL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 2000.00 Office Sought: House General Senate Primary Transaction ID: B0AC2F2547D004577945 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 2315.63 TOTAL This Period (last page this line number only).....

PAGE 31 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. HOLTKAMP, JOHN, , , 2025 06 Mailing Address PO BOX 17182 City State Zip Code **FEC Identification Number** IN SOUTHPORT 46227 Purpose of Disbursement C **EXPENSE REIMBURSEMENT - SEE MEMO** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 444.78 Office Sought: House Senate Primary General Transaction ID: B7B9E153A53C5439286F Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. HOLTKAMP, JOHN, , , Date of Disbursement Mailing Address PO BOX 17182 2025 04 City State Zip Code **FEC Identification Number** SOUTHPORT 46227 Purpose of Disbursement TRAVEL MILEAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 444.78 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B1A76F65193B04E4B92A Other (specify) President × Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HOLTKAMP, JOHN, , , Mailing Address PO BOX 17182 05 2025 City State Zip Code **FEC Identification Number** SOUTHPORT IN 46227 Purpose of Disbursement **PAYROLL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 2000.00 Office Sought: House General Senate Primary Transaction ID: B19072B58388D4D39920 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 2444.78 TOTAL This Period (last page this line number only).....

PAGE 32 62 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. HOLTKAMP, JOHN, , , 2025 06 Mailing Address PO BOX 17182 City State Zip Code **FEC Identification Number** IN SOUTHPORT 46227 Purpose of Disbursement C **EXPENSE REIMBURSEMENT - SEE MEMO** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 366.87 Office Sought: House Senate Primary General Transaction ID: B224EDA526DF34DAF8B8 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. HOLTKAMP, JOHN, , , Date of Disbursement Mailing Address PO BOX 17182 2025 05 City State Zip Code **FEC Identification Number** SOUTHPORT 46227 Purpose of Disbursement TRAVEL MILEAGE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 282.38 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B46AA691ACAE547E6A89 Other (specify) President × Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. HOLTKAMP, JOHN, , , Mailing Address PO BOX 17182 06 2025 City State Zip Code **FEC Identification Number** SOUTHPORT IN 46227 Purpose of Disbursement **PAYROLL** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 2000.00 Office Sought: House General Senate Primary Transaction ID: B1E38CEFAFF0B40CDAF3 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional).....

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

2366.87

PAGE 33 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. 1360 2025 Mailing Address 300 CLAREDON BLVD 03 **STE 800** City State Zip Code **FEC Identification Number** VA **ARLINGTON** 22201 Purpose of Disbursement **SOFTWARE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1850.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B27EACF1297D547B7977 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement B. 1360 Mailing Address 300 CLAREDON BLVD 2025 04 **STE 800** City State Zip Code **FEC Identification Number ARLINGTON** 22201 Purpose of Disbursement **SOFTWARE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 170.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BDBD574A2DF9741FAAE7 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement **C.** 1360 Mailing Address 300 CLAREDON BLVD 05 29 2025 STE 800 City State Zip Code **FEC Identification Number ARLINGTON** VA 22201 Purpose of Disbursement **SOFTWARE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 170.00 Office Sought: House General Senate Primary Transaction ID: B8B55AFC3719F4C65BBA President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 2190.00 TOTAL This Period (last page this line number only).....

Purpose of Disbursement **EVENT SPONSORSHIP** 

> House Senate

District:

President

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

Candidate Name

Office Sought:

State:

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

FEC Schedule B (Form 3) (Revised 05/2016)

Amount of Each Disbursement this Period

Transaction ID: B86DD1CA6A3D047C7B9F

Memo Item

250.00

747.52

Category/ Type

General

Disbursement For: 2026

Primary

Other (specify)

	FOR LINE	NUMBE	R:	F	PAGE	35	OF	62
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ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. KB STRATEGIC GROUP 06 2025 06 Mailing Address 3213 DUKE ST Zip Code City State **FEC Identification Number** VA **ALEXANDRIA** 22314-4533 Purpose of Disbursement C FINANCE CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 8600.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B8B80B74754224DF0B2F Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) **B.** LIMESTONE STRATEGIES Date of Disbursement Mailing Address 5750 CASTLE CREEK PARKWAY NORTH DR 2025 04 **STE 367** City Zip Code State **FEC Identification Number** IN **INDIANAPOLIS** 46250-4336 Purpose of Disbursement POLITICAL STRATEGY CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 4000.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID : B6027B4DC68D94B6B823 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. LIMESTONE STRATEGIES Mailing Address 5750 CASTLE CREEK PARKWAY NORTH DR 05 06 2025 STE 367 City Zip Code State **FEC Identification Number INDIANAPOLIS** IN 46250-4336 Purpose of Disbursement POLITICAL STRATEGY CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 4000.00 Office Sought: House Senate General Primary Transaction ID: B6A346FE4BF1C4B47B27 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 16600.00 TOTAL This Period (last page this line number only).....

Office Sought:

State:

House Senate

District:

President

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

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

## SCHEDULE B (FEC Form 3)

**PAGE** 36 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement LIMESTONE STRATEGIES 06 2025 Mailing Address 5750 CASTLE CREEK PARKWAY NORTH DR 06 **STE 367** City State Zip Code **FEC Identification Number** IN **INDIANAPOLIS** 46250-4336 Purpose of Disbursement C POLITICAL STRATEGY CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 4000.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BECB75CD95D0E48908A4 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B.** LINE ONE Date of Disbursement Mailing Address 6418 CARROLLTON AVE 2025 04 City State Zip Code **FEC Identification Number INDIANAPOLIS** 46220-1615 Purpose of Disbursement MEDIA CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 2500.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BA349B3425CA040E9B56 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. LINE ONE Mailing Address 6418 CARROLLTON AVE 05 06 2025 City Zip Code State **FEC Identification Number INDIANAPOLIS** 46220-1615 IN Purpose of Disbursement MEDIA CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type

Disbursement For: 2026

Primary

Other (specify)

General

. ▶	1						١
		7		7		-	4

Transaction ID: B9FA01715E6AD40D6AAE

Memo Item

2500.00

9000.00

President

District:

State:

PAGE 37 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the ITEMIZED DISBURSEMENTS X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. LINE ONE 06 2025 06 Mailing Address 6418 CARROLLTON AVE City State Zip Code **FEC Identification Number** IN **INDIANAPOLIS** 46220-1615 Purpose of Disbursement MEDIA CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 2500.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BBC203134DC4940A3A05 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B.** MAILCHIMP Date of Disbursement Mailing Address 675 PONCE DE LEON AVE NE 28 2025 04 City State Zip Code **FEC Identification Number ATLANTA** GA 30308-1884 Purpose of Disbursement SUBSCRIPTION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 135.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B714354DD4FA74B2F860 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. MAILCHIMP Mailing Address 675 PONCE DE LEON AVE NE 05 2025 City State Zip Code **FEC Identification Number** 30308-1884 **ATLANTA** GΑ Purpose of Disbursement SUBSCRIPTION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 135.00 Office Sought: House Senate Primary General Transaction ID: B500BF583E5DE465799A

Other (specify)

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

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

2770.00

Memo Item

State:

District:

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

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

## ITEMIZED DISBURSEMENTS

**PAGE** 38 62 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. MAILCHIMP 2025 06 Mailing Address 675 PONCE DE LEON AVE NE City State Zip Code **FEC Identification Number** GA **ATLANTA** 30308-1884 Purpose of Disbursement SUBSCRIPTION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 135.00 Office Sought: House Senate Primary General Transaction ID: BC5EBEE657DD84D01805 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. OLD NATIONAL BANK Date of Disbursement Mailing Address 1 MONUMENT CIR, STE 150 2025 16 City State Zip Code **FEC Identification Number INDIANAPOLIS** 46204-3030 Purpose of Disbursement **BANK FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 144.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B5BD77BE06BFC4511817 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. OLD NATIONAL BANK Mailing Address 1 MONUMENT CIR, STE 150 05 16 2025 City State Zip Code **FEC Identification Number INDIANAPOLIS** 46204-3030 IN Purpose of Disbursement **BANK FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 128.00 Office Sought: House Senate Primary General Transaction ID : BD00E803909B045839BE President Other (specify) Memo Item

407.00

**PAGE** 39 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement OLD NATIONAL BANK 2025 06 Mailing Address 1 MONUMENT CIR, STE 150 City State Zip Code **FEC Identification Number** IN **INDIANAPOLIS** 46204-3030 Purpose of Disbursement C **BANK FEES** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 128.00 Office Sought: House Senate Primary General Transaction ID: B55BBDBBD566944828F3 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) B. PATTERSON CONSULTING, LLC Date of Disbursement Mailing Address 4666 BOULEVARD PL 2025 04 City State Zip Code **FEC Identification Number INDIANAPOLIS** 46208-3550 Purpose of Disbursement FINANCE CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 3000.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B95734F1A11074C99B81 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. PATTERSON CONSULTING, LLC Mailing Address 4666 BOULEVARD PL 04 04 2025 City State Zip Code **FEC Identification Number INDIANAPOLIS** 46208-3550 IN Purpose of Disbursement FINANCE CONSULTING 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 3924.00 Office Sought: House Senate Primary General Transaction ID: BF650ABC0A93A4AD08AA President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 7052.00 TOTAL This Period (last page this line number only).....

PAGE 40 OF 62 FOR LINE NUMBER: (check only one) Use separate schedule(s)

Mailing Address 4666 BOULEVARD PL  City INDIANAPOLIS  State IN  State IN  46208-3550  D5  06  2  FEC Identification Number	
SHREVE FOR CONGRESS  Full Name (Last, First, Middle Initial)  A. PATTERSON CONSULTING, LLC  Mailing Address 4666 BOULEVARD PL  City INDIANAPOLIS  State IN  Zip Code 46208-3550  FEC Identification Number	
Full Name (Last, First, Middle Initial)  A. PATTERSON CONSULTING, LLC  Mailing Address 4666 BOULEVARD PL  City INDIANAPOLIS  Date of Disbursement  Dot 06  Z  FEC Identification Number	
A. PATTERSON CONSULTING, LLC  Mailing Address 4666 BOULEVARD PL  City INDIANAPOLIS  Date of Disbursement  Date of Disbursement  The property of the property o	
City State Zip Code INDIANAPOLIS IN 46208-3550 FEC Identification Number	·025
INDIANAPOLIS IN 46208-3550 FEC Identification Number	.020
Purpose of Disbursement FINANCE CONSULTING  001	
Candidate Name  Category/ Type  Amount of Each Disbursemen	t this Period
Office Sought:  House Senate President  State:  Disbursement For: 2026  Primary General Other (specify) ▼  Memo Item	3423.09 E0C104B41B66
State: District: Full Name (Last, First, Middle Initial)	
B. PATTERSON CONSULTING, LLC  Date of Disbursement	2025
City     State     Zip Code       INDIANAPOLIS     IN     46208-3550   FEC Identification Number	
Purpose of Disbursement FINANCE CONSULTING  001	
Candidate Name  Category/ Type  Amount of Each Disbursemen	nt this Period
Office Sought:  House Senate President  Disbursement For: 2026  Primary Other (specify)  Memo Item  Disbursement For: 2026  Transaction ID: B6726F9980	3000.00 F3B4375BE3
State: District:	
Full Name (Last, First, Middle Initial)  Date of Disbursement	
	025
City State Zip Code FEC Identification Number	
CARMEL IN 46032-4553  Purpose of Disbursement  C	_
PRINTING 001	
Candidate Name Category/ Type Amount of Each Disbursemen	
Office Sought:    House	171.20 B2BD4657A4D
SUBTOTAL of Disbursements This Page (optional)	6594.29
TOTAL This Period (last page this line number only)	

PAGE 41 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) X 17 18 19a 20a 20b 20c 21

for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. SLACK TECHNOLOGIES, INC 2025 Mailing Address 500 HOWARD STREET City State Zip Code **FEC Identification Number** CA SAN FRANCISCO 94105-3000 Purpose of Disbursement C SOFTWARE SUBSCRIPTION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 140.85 Office Sought: House Senate Primary General Transaction ID: B418B94DB00044F37943 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. SLACK TECHNOLOGIES, INC Date of Disbursement Mailing Address 500 HOWARD STREET 2025 19 05 City State Zip Code **FEC Identification Number** SAN FRANCISCO CA 94105-3000 Purpose of Disbursement SOFTWARE SUBSCRIPTION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B2C8F7A3E0B434039901 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. SLACK TECHNOLOGIES, INC Mailing Address 500 HOWARD STREET 06 2025 City State Zip Code **FEC Identification Number** SAN FRANCISCO 94105-3000 CA Purpose of Disbursement SOFTWARE SUBSCRIPTION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 92.58 Office Sought: House Senate Primary General Transaction ID: B333BBC2E2F4D491C8DA President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 320.05 TOTAL This Period (last page this line number only).....

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Use separate schedule(s) for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. SQUARESPACE 2025 10 Mailing Address 225 VARICK ST FL 12 City State Zip Code **FEC Identification Number** NY **NEW YORK** 10014-4383 Purpose of Disbursement WEBSITE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 201.60 Office Sought: House Senate Primary General Transaction ID: BDA24297930244768A8D Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B.** SQUARESPACE Date of Disbursement Mailing Address 225 VARICK ST 12 2025 05 FL 12 City State Zip Code **FEC Identification Number NEW YORK** NY 10014-4383 Purpose of Disbursement WEBSITE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 201.60 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B56F9E50462854788943 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. SQUARESPACE Mailing Address 225 VARICK ST 06 10 2025 FL 12 City Zip Code State **FEC Identification Number NEW YORK** 10014-4383 NY Purpose of Disbursement WEBSITE 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 201.60 Office Sought: House Senate Primary General Transaction ID: BC3E092400C5246C4A13 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 604.80 TOTAL This Period (last page this line number only).....

PAGE 43 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. UBER 2025 03 Mailing Address 1725 3RD ST Zip Code City State **FEC Identification Number** CA SAN FRANCISCO 94158-2203 Purpose of Disbursement TRAVEL TRANSPORTATION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 20.30 Office Sought: House Senate Primary General Transaction ID: B8478AD773F264CF5B14 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. UBER Date of Disbursement Mailing Address 1725 3RD ST 03 2025 04 City State Zip Code **FEC Identification Number** SAN FRANCISCO CA 94158-2203 Purpose of Disbursement TRAVEL TRANSPORTATION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 27.77 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BC6C77AAA64E24753A55 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. UBER Mailing Address 1725 3RD ST 06 05 2025 City State Zip Code **FEC Identification Number** SAN FRANCISCO 94158-2203 CA Purpose of Disbursement TRAVEL TRANSPORTATION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 40.67 Office Sought: House Senate Primary General Transaction ID: BD853AC80F39E42738BD President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 88.74 TOTAL This Period (last page this line number only).....

PAGE 44 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a Detailed Summary Page 20a 20b 20c 21

ITEMIZED DISBURSEMENTS 19b 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. UBER 06 09 2025 Mailing Address 1725 3RD ST Zip Code City State **FEC Identification Number** CA SAN FRANCISCO 94158-2203 Purpose of Disbursement TRAVEL TRANSPORTATION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 36.82 Office Sought: House Senate Primary General Transaction ID: B850C96BA7773470DBAE Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) B. UBER Date of Disbursement Mailing Address 1725 3RD ST 2025 06 City State Zip Code **FEC Identification Number** SAN FRANCISCO CA 94158-2203 Purpose of Disbursement TRAVEL TRANSPORTATION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 24.05 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B74FB2089F48344789A0 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. UBER Mailing Address 1725 3RD ST 06 13 2025 City State Zip Code **FEC Identification Number** SAN FRANCISCO 94158-2203 CA Purpose of Disbursement TRAVEL TRANSPORTATION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 18.40 Office Sought: House Senate Primary General Transaction ID: BFBF3012BC8234A39A63 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 79.27 TOTAL This Period (last page this line number only).....

#### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

62 PAGE 45 OF FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a 19b **Detailed Summary Page** 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. SHREVE FOR CONGRESS Date of Disbursement

A. UBER				Date of Disbursement
Mailing Address 1725 3RD ST				06 13 2025
City SAN FRANCISCO	State CA	Zip Code 94158-2203		FEC Identification Number
Purpose of Disbursement TRAVEL TRANSPORTATION			001	C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought:  House Senate President  State:  Disburs	ement For: 2 Primary Other (spec	General	21:	54.75  Transaction ID: BB3C45A790A8A4BB6A6C  Memo Item
Full Name (Last, First, Middle Initial)				
Mailing Address 1725 3RD ST				Date of Disbursement
				06 26 2025
City SAN FRANCISCO	State CA	Zip Code 94158-2203		FEC Identification Number
Purpose of Disbursement TRAVEL TRANSPORTATION			001	С
Candidate Name			Category/	Amount of Each Disbursement this Period
Office Sought: House Disburs	ement For:	2026	Туре	14.06
Senate President  State: District:	Primary Other (spec	General		Transaction ID : B48AE4E9C5F76485CA2D  Memo Item
Full Name (Last, First, Middle Initial)				
C. UBER				Date of Disbursement
Mailing Address 1725 3RD ST				06 / 26 / 2025
City SAN FRANCISCO Purpose of Disbursement	State CA	Zip Code 94158-2203		FEC Identification Number
TRAVEL TRANSPORTATION			001	C
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought:  Senate  President  State:  Disburs  Senate  President	ement For: 2 Primary Other (spec	General		36.79  Transaction ID: BA7F126A200CC485F894  Memo Item
SUBTOTAL of Disbursements This Page (optional	l)			105.60
TOTAL This Period (last page this line number of	nlv)			

#### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full)

Mailing Address 1725 3RD ST

A. UBER

City

SAN FRANCISCO

Candidate Name

Office Sought:

State:

B. UBER

City

Purpose of Disbursement TRAVEL TRANSPORTATION

Full Name (Last, First, Middle Initial)

SHREVE FOR CONGRESS

House Senate

House Senate

District:

President

President

District:

District:

Full Name (Last, First, Middle Initial)

Mailing Address 1725 3RD ST

SAN FRANCISCO

Candidate Name

Office Sought:

Purpose of Disbursement TRAVEL TRANSPORTATION

President

PAGE 46 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Date of Disbursement 06 2025 26 Zip Code State **FEC Identification Number** CA 94158-2203 001 Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 35.11 Primary General Transaction ID: B6AF5B69A41974FD9B96 Other (specify) Memo Item Date of Disbursement 2025 06 State Zip Code **FEC Identification Number** CA 94158-2203 001 Amount of Each Disbursement this Period Category/ Type 14.70 Disbursement For: 2026 Primary General Transaction ID: BBB18BB6383BE4DBDAC0 Other (specify) Memo Item

Full Name (Last, First, Middle Initial)

#### C. UBER

State:

State:

Mailing Address 1725 3RD ST City State Zip Code SAN FRANCISCO 94158-2203 CA Purpose of Disbursement TRAVEL TRANSPORTATION 001 Candidate Name Category/ Type Disbursement For: 2026 Office Sought: House Senate Primary General

м м	/	D D	/	Y Y Y
06		27		2025

Date of Disbursement

**FEC Identification Number** 

Amount of Each Disbursement this Period

16.46 Transaction ID: BD80BB5A2137946D5827

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... 66.27 TOTAL This Period (last page this line number only).....

Other (specify)

## ITEMIZED DISBURSEMENTS

President

District:

State:

PAGE 47 62 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. UBER 2025 06 Mailing Address 1725 3RD ST Zip Code City State **FEC Identification Number** CA SAN FRANCISCO 94158-2203 Purpose of Disbursement TRAVEL TRANSPORTATION 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 52.31 Office Sought: House Senate Primary General Transaction ID: BD2FD45E61E8A4C09A2A Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) **B. UNBOUNCE** Date of Disbursement Mailing Address 100 GARFIELD ST 2025 10 04 City State Zip Code **FEC Identification Number DENVER** CO 80206-5597 Purpose of Disbursement **SOFTWARE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 99.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BE787392D0EF84D709E7 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. UNBOUNCE Mailing Address 100 GARFIELD ST 05 2025 City State Zip Code **FEC Identification Number DENVER** CO 80206-5597 Purpose of Disbursement **SOFTWARE** 001 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2026 99.00 Office Sought: House General Senate Primary Transaction ID: B1683D6CA879449B3A73

Other (specify)

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

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

250.31

Memo Item

## ITEMIZED DISBURSEMENTS

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

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

2099.00

PAGE 49 62 FOR LINE NUMBER: Use separate schedule(s) (check only one) X 17 18 19a 20a 20b 20c 21

for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page 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) SHREVE FOR CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement A. WHITE, ISAAC, , , 2025 Mailing Address PO BOX 17182 City State Zip Code **FEC Identification Number** IN SOUTHPORT 46227 Purpose of Disbursement FIELD CONSULTING SERVICES 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1500.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: BA75D8C4864C2475384B Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) B. WHITE, ISAAC, , , Date of Disbursement Mailing Address PO BOX 17182 2025 06 City State Zip Code **FEC Identification Number** SOUTHPORT 46227 Purpose of Disbursement FIELD CONSULTING SERVICES 001 Candidate Name Amount of Each Disbursement this Period Category/ Type 1500.00 Disbursement For: 2026 Office Sought: House Senate Primary General Transaction ID: B74DA3DFDF1C1412EB43 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 3000.00 TOTAL This Period (last page this line number only)..... 72041.31

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

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13b Transaction ID: C6A7F6FC589A04443B97 NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , ★ General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 09 2024 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: C6FDE22CD942F476C8F9 NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , ★ General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 05 0.00 06 NONE 2024 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

13a 13b

OF

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Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This I  1000000.00  TERMS  Date Incurred  Date Due  Interest Rate (It none, enter 0)  Was an				130
SHREVE, JEFFERSON, , ,  Mailing Address PO BOX 17182  City SOUTHPORT  Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This I 1000000.00  TERMS  Date Incurred  Date Due  Interest Rate (If none, enter 0)  Was an out of Employer  List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount City State  ZIP Code  Outstanding:  Amount Guaranteed Outstanding:  Occupation  Amount City State  ZIP Code  Outstanding:  Occupation  Amount City  Name of Employer  Occupation  Amount City  Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount City  Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount City  Amount Cuaranteed Outstanding:  Occupation  Amount Cuaranteed Outstanding:  Name of Employer  Occupation  Amount City  Name of Employer  Occupation	, ,		Transa	action ID : CA041F3E6D2D64F809A6
SHREVE, JEFFERSON, , ,  Mailing Address PO BOX 17182  City SOUTHPORT    State   ZIP Code	LOAN SOURCE Full Name (Last, First, N	Middle Initial)	□ Mome Item	Election: 2024
City State   ZIP Code   Mailing Address   State   ZIP Code   Mailing Address   City   State   ZIP Code   Mailing Address   City   State   ZIP Code   City   City   State   ZIP Code   City   City	•	,	□ метю кеп	Primary
SOUTHPORT  IN 46227  Personal Funds of the Cand  Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This I  1000000.00  TERMS  Date Incurred  Date Due  Interest Rate (If none, enter 0)  NONE  O.00  We (apr)  Ves  List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Mailing Address  Occupation  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Namount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Mailing Address  Occupation  Amount Outstanding:  Name of Employer  Occupation  Amount Outstanding:  Name of Employer  Occupation  Amount Outstanding:  Name of Employer  Occupation				Other (specify) ▼
Original Amount of Loan  Cumulative Payment To Date  Balance Outstanding at Close of This I  1000000.00  TERMS  Date Incurred  Date Due  Interest Rate (If none, enter 0)  NONE  List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Mailing Address  Occupation  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Outstanding:  Amount Outstanding:  Amount Occupation  Amount Occupation  Name of Employer  Name of Employer  Occupation  Name of Employer  Occupation  Amount Outstanding:  Amount Outstanding:  Amount Outstanding:  Amount Outstanding:  Amount Occupation  Occupation  Name of Employer  Occupation				Personal Funds of the Candidate
TERMS Date Incurred Date Due Interest Rate (If none, enter 0)  Mailing Address  City State ZIP Code Outstanding:  City State ZIP Code Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code Outstanding:  Amount Guaranteed Outstanding:  City State ZIP Code Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  City State ZIP Code Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Mailing Address  Occupation	SOUTHPORT	IIN	40227	
TERMS Date Incurred Date Due Interest Rate (If none, enter 0) Secured:    Most	Original Amount of Loan	Cumulative Page	yment To Date Ba	lance Outstanding at Close of This Period
List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Occupation	1000000.00		0.00	1000000.00
List All Endorsers or Guarantors (if any) to Loan Source  1. Full Name (Last, First, Middle Initial)  Mailing Address  City  State  ZIP Code  Occupation  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Occupation	TERMS Date Incurred	С		
1. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Occupation		M M / D D	NONE	0.00 % (apr) Yes No
Mailing Address  City State ZIP Code Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Occupation  Occupation  Occupation  Occupation	List All Endorsers or Guarantors (if any	to Loan Source		
City State ZIP Code Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  City State ZIP Code Guaranteed Outstanding:  City State ZIP Code Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mame of Employer  Mailing Address  City State ZIP Code Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Outstanding:  Occupation  Mailing Address  Occupation	1. Full Name (Last, First, Middle Initial)		Name of Employer	
City State ZIP Code Guaranteed Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Name of Employer  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Name of Employer  Amount Guaranteed Outstanding:  Name of Employer  Amount Guaranteed Outstanding:  Occupation  Name of Employer  Mailing Address  Occupation	Mailing Address		Occupation	
City State ZIP Code Outstanding:  2. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Amount Guaranteed Outstanding:  Occupation  Amount Guaranteed Outstanding:  Occupation  Name of Employer  Mailing Address  Occupation				
Mailing Address  Occupation  Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  Occupation  Name of Employer  Occupation  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation	City	ZIP Code		9 9
Amount Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial)  Mailing Address  City  State  ZIP Code  Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation	2. Full Name (Last, First, Middle Initial)		Name of Employer	
City State ZIP Code Guaranteed Outstanding:  3. Full Name (Last, First, Middle Initial) Name of Employer  Mailing Address Occupation  City State ZIP Code Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial) Name of Employer  Mailing Address Occupation  Name of Employer  Occupation	Mailing Address		Occupation	
Outstanding:  3. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Occupation  Name of Employer  Outstanding:  Amount Guaranteed Outstanding:  Name of Employer  Occupation			1 111 111	
Mailing Address  Occupation  Amount Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation	City	ZIP Code		7
City State ZIP Code Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation	3. Full Name (Last, First, Middle Initial)		Name of Employer	
City State ZIP Code Guaranteed Outstanding:  4. Full Name (Last, First, Middle Initial) Name of Employer  Mailing Address Occupation	Mailing Address		Occupation	
Outstanding:  4. Full Name (Last, First, Middle Initial)  Name of Employer  Mailing Address  Occupation				
Mailing Address Occupation	City	ZIP Code		7
	4. Full Name (Last, First, Middle Initial)		Name of Employer	
Amazint	Mailing Address		Occupation	
			Amount	
City State ZIP Code Guaranteed Outstanding:	City	ZIP Code		9
SUBTOTALS This Period This Page (optional) 1000000.00  TOTALS This Period (last page in this line only)		·		1000000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summ				ward to appropriate line of Summary

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

PAGE FOR LINE NUMBER: **X** 13a (check only one)

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13b Transaction ID: C90FFB25E53CC4FFE900 NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 700000.00 0.00 700000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 28 0.00 03 NONE 2024 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 700000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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FOR LINE NUMBER: (check only one)

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62

Transaction ID: C17DEF342EDB74A2FBAA NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000000.00 0.00 1000000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 02 2024 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: CBFF3D1FC2D0D46F6998 NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 600000.00 0.00 600000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 26 0.00 NONE 04 2024 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 600000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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13b Transaction ID: C32DDF7217B2B428A8E7 NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000000.00 0.00 1000000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 02 2024 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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62

13b Transaction ID: C9FE6944440CD40C1A2F NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 300000.00 0.00 300000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 03 2024 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 300000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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X 13a

13b Transaction ID: C2BFDBFB36A9643EDAB8 NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , ★ General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 50000.00 0.00 50000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 08 NONE 2024 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 50000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: CE130FB8252BF49B5AF8 NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 500000.00 0.00 500000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 2024 NONE 03 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 500000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: C4C0B138262214F288FE NAME OF COMMITTEE (In Full) SHREVE FOR CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2024 Memo Item Primary SHREVE, JEFFERSON, , , General Mailing Address Other (specify) PO BOX 17182 City State ZIP Code Personal Funds of the Candidate 46227 SOUTHPORT IN Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 500000.00 0.00 500000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 NONE 04 2024 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 500000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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FOR LINE NUMBER: (check only one)

		138
AME OF COMMITTEE (In Full) SHREVE FOR CONGRESS		Transaction ID : CEA4F5FB9BCF54383A38
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)	Memo Item Election: 2024
SHREVE, JEFFERSON, , ,		Primary
Mailing Address		General Other (specify) ▼
PO BOX 17182		——————————————————————————————————————
City	State	ZIP Code
SOUTHPORT	IN	46227 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	yment To Date Balance Outstanding at Close of This Period
50000.00	2	0.00 50000.00
TERMS Date Incurred	D	Date Due Interest Rate Secured: (If none, enter 0)
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	/ Y Y NONE Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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FOR LINE NUMBER: (check only one)

			Detailed Garrinary	y rage	13b
NAME OF COMMITTEE (In Full)			Tra	ansaction ID : C75AE888D13C3	4C5BBD3
SHREVE FOR CONGRESS					
LOAN SOURCE Full Name (Last, First, Mid	dle Initial)		☐ Memo		
SHREVE, JEFFERSON, , ,				Primary  General	
Mailing Address PO BOX 17182				Other (specify)	
City	State	ZIP Code	)		
SOUTHPORT	IN	46227		Personal Funds of	the Candidate
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance Outstanding at Close	of This Perio
50000.00	,	7	0.00	, ,	50000.00
TERMS Date Incurred	D	ate Due	Interest (If none,	t Rate Sec , enter 0)	cured:
08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	/ Y N	ONE	0.00 % (apr)	Yes X No
List All Endorsers or Guarantors (if any) to	Loan Source				
1. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address			Occupation		
		<b>I</b>	Amount		
City State	ZIP Code	<b>I</b>	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(	Occupation		
City.	ZID Code		Amount Guaranteed		
City	ZIP Code		Outstanding:	y y	
3. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(	Occupation		
			Amount Guaranteed		
City	ZIP Code		Outstanding:	7	
4. Full Name (Last, First, Middle Initial)	'	1	Name of Employer		
Mailing Address		(	Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:	7 7 7 7	
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Carry outstanding balance only to LINE 3, Sch	edule D, for this	s line. If no	Schedule D, carry	forward to appropriate line	of Summary.