

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.
Hoyer for Congress

ADDRESS (number and street)

 Check if different than previously reported. (ACC)
CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
STATE ▼ DISTRICT

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Pritchard, Amy, , ,
Signature of Treasurer Pritchard, Amy, , , Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Hoyer for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 03 / 31 / 2026

	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))	6.43	386976.09
(b) Total Contribution Refunds (from Line 20(d))	10500.00	10500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 10493.57	376476.09
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	41455.41	545734.36
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	2324.26
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	41455.41	543410.10
8. Cash on Hand at Close of Reporting Period (from Line 27)		
	368045.85	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
	0.00	

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

Hoyer for Congress

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	108387.58
(ii) Unitemized.....	6.43	19588.51
(iii) TOTAL of contributions from individuals ▶	6.43	127976.09
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	259000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6.43	386976.09
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	221.84	13039.82
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	2324.26
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	228.27	402340.17

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	41455.41	545734.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	800.00	6302.00
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	6000.00	6000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	4500.00	4500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	10500.00	10500.00
21. OTHER DISBURSEMENTS	25225.38	186345.55
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	77980.79	748881.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	445798.37
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	228.27
25. SUBTOTAL (add Line 23 and Line 24).....	446026.64
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	77980.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	368045.85

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Hoyer for Congress

A. Full Name (Last, First, Middle Initial)
Hoyer's Majority Fund

Mailing Address 1032 15th St NW
Ste 247

City Washington State DC Zip Code 20005-1502

FEC ID number of contributing federal political committee. **C** C00513002

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
13039.82

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 13 / 2026

Transaction ID : 6106858

Amount of Each Receipt this Period
221.84

Memo Item

B. Full Name (Last, First, Middle Initial)
Alexander, Stacey, , ,

Mailing Address 4203 Bradley Ln

City Chevy Chase State MD Zip Code 20815-5234

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

Name of Employer Occupation
Avoq Consultant

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 29 / 2025

Transaction ID : 6106872

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
American Pilots' Association Inc PAC

Mailing Address 499 S Capitol St SW
Ste 409

City Washington State DC Zip Code 20003-4023

FEC ID number of contributing federal political committee. **C** C00041061

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 21 / 2025

Transaction ID : 6106876

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 221.84

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

A. Full Name (Last, First, Middle Initial)
Bahn, Patrick, , ,

Mailing Address 2519 Benning Rd NE

City Washington	State DC	Zip Code 20002-4805
--------------------	-------------	------------------------

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

Name of Employer TGV Rockets	Occupation CEO
---------------------------------	-------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2025

Transaction ID : 6106873

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Experian North America, Inc. PAC

Mailing Address 475 Anton Blvd

City Costa Mesa	State CA	Zip Code 92626-7037
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00379768

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

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2025

Transaction ID : 6106877

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
McClean, Scott, , ,

Mailing Address 6425 26th St N

City Arlington	State VA	Zip Code 22207-1022
-------------------	-------------	------------------------

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

Name of Employer Self-Employed	Occupation Consultant
-----------------------------------	--------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 10 / 2025

Transaction ID : 6106875

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

A. Full Name (Last, First, Middle Initial)
Stevens, Cynthia, M., ,

Mailing Address 888 Blvd Of The Arts
Apt 306

City Sarasota State FL Zip Code 34236-4828

FEC ID number of contributing federal political committee.

Name of Employer N/A Occupation Retired

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 07 / 2025

Transaction ID : 6106874

Amount of Each Receipt this Period

Memo Item

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="221.84"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2026
Mailing Address 14 Arrow St		FEC Identification Number C
City Cambridge	State MA	Zip Code 02138-5106
Purpose of Disbursement Credit Card Processing Fee		Amount of Each Disbursement this Period 0.26
Candidate Name		Transaction ID : 500735582
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Amalgamated Bank		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2026
Mailing Address 1825 K St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20006-1202
Purpose of Disbursement Bank Fee		Amount of Each Disbursement this Period 467.36
Candidate Name		Transaction ID : 500737843
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Amalgamated Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2026
Mailing Address 1825 K St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20006-1202
Purpose of Disbursement Bank Fee		Amount of Each Disbursement this Period 421.97
Candidate Name		Transaction ID : 500739920
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	889.59
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Amalgamated Bank		M M / D D / Y Y Y Y 03 / 27 / 2026
Mailing Address 1825 K St NW		FEC Identification Number
City Washington	State DC	Zip Code 20006-1202
Purpose of Disbursement Bank Fee		Category/Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	402.44
State: District:		Transaction ID : 500741811
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. American Express		M M / D D / Y Y Y Y 01 / 09 / 2026
Mailing Address 1801 NW 66th Ave Ste 103C		FEC Identification Number
City Plantation	State FL	Zip Code 33313-4571
Purpose of Disbursement Credit Card Statement - See Below		Category/Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	4855.14
State: District:		Transaction ID : 500735597
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. American Airlines		M M / D D / Y Y Y Y 01 / 09 / 2026
Mailing Address PO Box 619616		FEC Identification Number
City Dallas	State TX	Zip Code 75261-9616
Purpose of Disbursement Travel		Category/Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	447.36
State: District:		Transaction ID : 500735592
		<input checked="" type="checkbox"/> Memo Item *

SUBTOTAL of Disbursements This Page (optional).....▶	5257.58
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Exxon Mobil		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026
Mailing Address 1601 Wisconsin Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20007-2721
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 107.52	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500735594 <input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) B. Fogo De Chao		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026
Mailing Address 1101 Pennsylvania Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20004-2504
Purpose of Disbursement Catering	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 3774.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500735594 <input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026
Mailing Address 233 S Wacker Dr		FEC Identification Number C
City Chicago	State IL	Zip Code 60606-7147
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 408.48	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500735594 <input checked="" type="checkbox"/> Memo Item *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2026
Mailing Address 1801 NW 66th Ave Ste 103C		FEC Identification Number C
City Plantation	State FL	Zip Code 33313-4571
Purpose of Disbursement Credit Card Payment - See Below		Amount of Each Disbursement this Period 983.41
Candidate Name		Transaction ID : 500738960
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2026
Mailing Address PO Box 619616		FEC Identification Number C
City Dallas	State TX	Zip Code 75261-9616
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 55.16
Candidate Name		Transaction ID : 500738957
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2026
Mailing Address 233 S Wacker Dr		FEC Identification Number C
City Chicago	State IL	Zip Code 60606-7147
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 816.28
Candidate Name		Transaction ID : 500738956
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	983.41
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 34			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Doggett, Taylor, , ,		Date of Disbursement MM / DD / YYYY 01 / 14 / 2026
Mailing Address 1550 7th St NW Apt 736		FEC Identification Number C
City Washington	State DC	Zip Code 20001-3276
Purpose of Disbursement Salary	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 110.44	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500733070 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Google LLC		Date of Disbursement MM / DD / YYYY 01 / 05 / 2026
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Subscription	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 498.62	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500731805 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Google LLC		Date of Disbursement MM / DD / YYYY 02 / 05 / 2026
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Subscription	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 498.62	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500738571 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1107.68
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Google LLC		Date of Disbursement MM / DD / YYYY 03 / 05 / 2026
Mailing Address 1600 Amphitheatre Pkwy		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1351
Purpose of Disbursement Subscription	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 498.62	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500740320
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Granite Insurance/E-COMP		Date of Disbursement MM / DD / YYYY 01 / 05 / 2026
Mailing Address 360 Lindbergh Ave		FEC Identification Number C
City Livermore	State CA	Zip Code 94551
Purpose of Disbursement Insurance	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 12.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500741251
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Granite Insurance/E-COMP		Date of Disbursement MM / DD / YYYY 01 / 20 / 2026
Mailing Address 360 Lindbergh Ave		FEC Identification Number C
City Livermore	State CA	Zip Code 94551
Purpose of Disbursement Insurance	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 12.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500735077
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	523.62
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Granite Insurance/E-COMP			Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2026	
Mailing Address 360 Lindbergh Ave			FEC Identification Number C	
City Livermore	State CA	Zip Code 94551	Amount of Each Disbursement this Period 12.50	
Purpose of Disbursement Insurance		Category/ Type	Transaction ID : 500738570	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Granite Insurance/E-COMP			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2026	
Mailing Address 360 Lindbergh Ave			FEC Identification Number C	
City Livermore	State CA	Zip Code 94551	Amount of Each Disbursement this Period 12.50	
Purpose of Disbursement Insurance		Category/ Type	Transaction ID : 500739301	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Granite Insurance/E-COMP			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2026	
Mailing Address 360 Lindbergh Ave			FEC Identification Number C	
City Livermore	State CA	Zip Code 94551	Amount of Each Disbursement this Period 12.50	
Purpose of Disbursement Insurance		Category/ Type	Transaction ID : 500740224	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	37.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Granite Insurance/E-COMP		Date of Disbursement MM / DD / YYYY 03 / 17 / 2026
Mailing Address 360 Lindbergh Ave		FEC Identification Number C
City Livermore	State CA	Zip Code 94551
Purpose of Disbursement Insurance	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 12.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500741252
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Heartland Payment Systems, Inc.		Date of Disbursement MM / DD / YYYY 01 / 14 / 2026
Mailing Address 2001 Aerospace Pkwy		FEC Identification Number C
City Brookpark	State OH	Zip Code 44142-1002
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 142.46	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500733068
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Heartland Payment Systems, Inc.		Date of Disbursement MM / DD / YYYY 01 / 14 / 2026
Mailing Address 2001 Aerospace Pkwy		FEC Identification Number C
City Brookpark	State OH	Zip Code 44142-1002
Purpose of Disbursement Payroll Services	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 79.02	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500733069
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	233.98
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Heartland Payment Systems, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2026	
Mailing Address 2001 Aerospace Pkwy			FEC Identification Number C	
City Brookpark	State OH	Zip Code 44142-1002	Amount of Each Disbursement this Period 84.18	
Purpose of Disbursement Payroll Taxes		Candidate Name	Transaction ID : 500737844	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Memo Item <input type="checkbox"/>	
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:		

Full Name (Last, First, Middle Initial) B. Heartland Payment Systems, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2026	
Mailing Address 2001 Aerospace Pkwy			FEC Identification Number C	
City Brookpark	State OH	Zip Code 44142-1002	Amount of Each Disbursement this Period 68.74	
Purpose of Disbursement Payroll Services		Candidate Name	Transaction ID : 500737845	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Memo Item <input type="checkbox"/>	
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:		

Full Name (Last, First, Middle Initial) C. Heartland Payment Systems, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2026	
Mailing Address 2001 Aerospace Pkwy			FEC Identification Number C	
City Brookpark	State OH	Zip Code 44142-1002	Amount of Each Disbursement this Period 84.18	
Purpose of Disbursement Payroll Taxes		Candidate Name	Transaction ID : 500738942	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Memo Item <input type="checkbox"/>	
Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	237.10
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 34			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Heartland Payment Systems, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2026
Mailing Address 2001 Aerospace Pkwy			FEC Identification Number C
City Brookpark	State OH	Zip Code 44142-1002	Amount of Each Disbursement this Period 68.74
Purpose of Disbursement Payroll Services		Category/ Type	Transaction ID : 500738943
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Heartland Payment Systems, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2026
Mailing Address 2001 Aerospace Pkwy			FEC Identification Number C
City Brookpark	State OH	Zip Code 44142-1002	Amount of Each Disbursement this Period 84.16
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : 500739917
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Heartland Payment Systems, Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2026
Mailing Address 2001 Aerospace Pkwy			FEC Identification Number C
City Brookpark	State OH	Zip Code 44142-1002	Amount of Each Disbursement this Period 68.74
Purpose of Disbursement Payroll Services		Category/ Type	Transaction ID : 500739918
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	221.64
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

A. Heartland Payment Systems, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2001 Aerospace Pkwy

City Brookpark State OH Zip Code 44142-1002

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 84.18

Transaction ID : 500740799

Memo Item

B. Heartland Payment Systems, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2001 Aerospace Pkwy

City Brookpark State OH Zip Code 44142-1002

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 68.74

Transaction ID : 500740800

Memo Item

C. Heartland Payment Systems, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2001 Aerospace Pkwy

City Brookpark State OH Zip Code 44142-1002

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought: House Senate President

Disbursement For: 2026 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 30 / 2026

FEC Identification Number: C

Amount of Each Disbursement this Period: 68.74

Transaction ID : 500741808

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 221.66

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Heartland Payment Systems, Inc.			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2026	
Mailing Address 2001 Aerospace Pkwy			FEC Identification Number C	
City Brookpark	State OH	Zip Code 44142-1002	Amount of Each Disbursement this Period 84.16	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : 500741809	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Lexington Park Leader, Inc.			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2026	
Mailing Address 21681 Great Mills Ln			FEC Identification Number C	
City Lexington Park	State MD	Zip Code 20653-3802	Amount of Each Disbursement this Period 400.00	
Purpose of Disbursement Advertisement		Category/ Type	Transaction ID : 500733073	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. NGP VAN, Inc.			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2026	
Mailing Address 655 15th St NW Ste 650			FEC Identification Number C	
City Washington	State DC	Zip Code 20005-5701	Amount of Each Disbursement this Period 5083.64	
Purpose of Disbursement Software		Category/ Type	Transaction ID : 500740541	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5567.80
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Paragon Solutions, Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2026
Mailing Address 2141 E Broadway Rd Ste 202		FEC Identification Number C
City Tempe	State AZ	Zip Code 85282-1895
Purpose of Disbursement Credit Card Processing Fees		Amount of Each Disbursement this Period 25.00
Candidate Name		Transaction ID : 500730511
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Paragon Solutions, Inc.		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2026
Mailing Address 2141 E Broadway Rd Ste 202		FEC Identification Number C
City Tempe	State AZ	Zip Code 85282-1895
Purpose of Disbursement Credit Card Processing Fee		Amount of Each Disbursement this Period 25.00
Candidate Name		Transaction ID : 500737937
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Perkins Coie, LLP		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2026
Mailing Address 1201 3rd Ave FI 40		FEC Identification Number C
City Seattle	State WA	Zip Code 98101-3029
Purpose of Disbursement Legal & Compliance Services		Amount of Each Disbursement this Period 4932.18
Candidate Name		Transaction ID : 500736487
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4982.18
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Perkins Coie, LLP		Date of Disbursement MM / DD / YYYY 02 / 10 / 2026
Mailing Address 1201 3rd Ave FI 40		FEC Identification Number C
City Seattle	State WA	Zip Code 98101-3029
Purpose of Disbursement Legal & Compliance Services		Amount of Each Disbursement this Period 9688.97
Candidate Name	Category/Type	Transaction ID : 500738761
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Perkins Coie, LLP		Date of Disbursement MM / DD / YYYY 03 / 12 / 2026
Mailing Address 1201 3rd Ave FI 40		FEC Identification Number C
City Seattle	State WA	Zip Code 98101-3029
Purpose of Disbursement Legal & Compliance Services		Amount of Each Disbursement this Period 6105.56
Candidate Name	Category/Type	Transaction ID : 500740798
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Premier Fiorello Consulting		Date of Disbursement MM / DD / YYYY 01 / 06 / 2026
Mailing Address 1032 15th St NW Ste 247		FEC Identification Number C
City Washington	State DC	Zip Code 20005-1502
Purpose of Disbursement Fundraising Consulting Services		Amount of Each Disbursement this Period 3000.00
Candidate Name	Category/Type	Transaction ID : 500731208
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	18794.53
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Rose, Danielle, , ,		Date of Disbursement MM / DD / YYYY 01 / 14 / 2026
Mailing Address 9407 48th Pl		FEC Identification Number C
City College Park	State MD	Zip Code 20740-1607
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 188.39
Candidate Name	Category/ Type	Transaction ID : 500733071
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Sage, Nicholas, , ,		Date of Disbursement MM / DD / YYYY 01 / 14 / 2026
Mailing Address 1501 12th St NW Apt 2		FEC Identification Number C
City Washington	State DC	Zip Code 20005-4458
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 368.13
Candidate Name	Category/ Type	Transaction ID : 500733072
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Sage, Nicholas, , ,		Date of Disbursement MM / DD / YYYY 01 / 29 / 2026
Mailing Address 1501 12th St NW Apt 2		FEC Identification Number C
City Washington	State DC	Zip Code 20005-4458
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 368.12
Candidate Name	Category/ Type	Transaction ID : 500737846
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	924.64
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 34	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Sage, Nicholas, , ,		Date of Disbursement MM / DD / YYYY 02 / 12 / 2026
Mailing Address 1501 12th St NW Apt 2		FEC Identification Number C
City Washington	State DC	Zip Code 20005-4458
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 368.12
Candidate Name	Category/ Type	Transaction ID : 500738944
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Sage, Nicholas, , ,		Date of Disbursement MM / DD / YYYY 02 / 26 / 2026
Mailing Address 1501 12th St NW Apt 2		FEC Identification Number C
City Washington	State DC	Zip Code 20005-4458
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 368.13
Candidate Name	Category/ Type	Transaction ID : 500739919
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Sage, Nicholas, , ,		Date of Disbursement MM / DD / YYYY 03 / 12 / 2026
Mailing Address 1501 12th St NW Apt 2		FEC Identification Number C
City Washington	State DC	Zip Code 20005-4458
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 368.12
Candidate Name	Category/ Type	Transaction ID : 500740801
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1104.37
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 34			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Sage, Nicholas, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2026		
Mailing Address 1501 12th St NW Apt 2			FEC Identification Number C		
City Washington	State DC	Zip Code 20005-4458	Amount of Each Disbursement this Period 368.13		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : 500741810		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	<input type="checkbox"/> Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	368.13
TOTAL This Period (last page this line number only).....▶	41455.41

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 34	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 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)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Hoyer's Majority Fund		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2026
Mailing Address 1032 15th St NW Ste 247		FEC Identification Number C C00513002
City Washington	State DC	Zip Code 20005-1502
Purpose of Disbursement Transfer		Amount of Each Disbursement this Period 800.00
Candidate Name		Transaction ID : 500731193
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	800.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 34	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Barnes, Roy, E., ,		Date of Disbursement MM / DD / YYYY 01 / 29 / 2026
Mailing Address 447 Whitlock Ave SW		FEC Identification Number C
City Marietta	State GA	Zip Code 30064-2329
Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500737848 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Dodge, Nancy, R., ,		Date of Disbursement MM / DD / YYYY 01 / 29 / 2026
Mailing Address 40993 Cremona Rd		FEC Identification Number C
City Mechanicsville	State MD	Zip Code 20659-4818
Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1500.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500737849 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Shah, Vinod, K., ,		Date of Disbursement MM / DD / YYYY 01 / 29 / 2026
Mailing Address 40734 Parlett Morgan Rd		FEC Identification Number C
City Mechanicsville	State MD	Zip Code 20659-4710
Purpose of Disbursement Refund	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 3000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : 500737847 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	6000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. American Federation of State County & Municipal Employees PEOPLE		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2026
Mailing Address 1625 L St NW		FEC Identification Number C C00011114
City Washington	State DC	Zip Code 20036-5665
Purpose of Disbursement Refund		Amount of Each Disbursement this Period 2500.00
Candidate Name	Category/Type	Transaction ID : 500737852
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Employees of RTX Corporation PAC		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2026
Mailing Address 1101 Pennsylvania Ave NW Fl 10		FEC Identification Number C C00097568
City Washington	State DC	Zip Code 20004-2566
Purpose of Disbursement Refund		Amount of Each Disbursement this Period 500.00
Candidate Name	Category/Type	Transaction ID : 500737851
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. L3Harris Technologies Inc. PAC		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2026
Mailing Address 1300 Wilson Blvd Ste 1000		FEC Identification Number C C00100321
City Arlington	State VA	Zip Code 22209-2321
Purpose of Disbursement Refund		Amount of Each Disbursement this Period 1500.00
Candidate Name	Category/Type	Transaction ID : 500737850
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	4500.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Adrian Boafo for Congress		Date of Disbursement MM / DD / YYYY 03 / 20 / 2026
Mailing Address PO Box 408		FEC Identification Number C C00933994
City Bowie	State MD	Zip Code 20718-0408
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name Boafo, Adrian, , ,		Transaction ID : 500741504
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MD District: 05		

Full Name (Last, First, Middle Initial) B. Adrian Boafo for Congress		Date of Disbursement MM / DD / YYYY 03 / 20 / 2026
Mailing Address PO Box 408		FEC Identification Number C C00933994
City Bowie	State MD	Zip Code 20718-0408
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name Boafo, Adrian, , ,		Transaction ID : 500741505
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MD District: 05		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 01 / 09 / 2026
Mailing Address 1801 NW 66th Ave Ste 103C		FEC Identification Number C
City Plantation	State FL	Zip Code 33313-4571
Purpose of Disbursement Credit Card Payment - See Below		Amount of Each Disbursement this Period 991.37
Candidate Name		Transaction ID : 500735600
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4991.37
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Costco Wholesale Corporation			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address PO Box 34331			FEC Identification Number C	
City Seattle	State WA	Zip Code 98124-1331	Amount of Each Disbursement this Period 308.24	
Purpose of Disbursement Refreshments - Officially Connected			Transaction ID : 500735598	
Candidate Name			<input checked="" type="checkbox"/> Memo Item *	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Tatte Holdings LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2026	
Mailing Address 101 Main St Ste 100			FEC Identification Number C	
City Cambridge	State MA	Zip Code 02142-1591	Amount of Each Disbursement this Period 683.13	
Purpose of Disbursement Catering - Officially Connected			Transaction ID : 500735599	
Candidate Name			<input checked="" type="checkbox"/> Memo Item *	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. American Express			Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2026	
Mailing Address 1801 NW 66th Ave Ste 103C			FEC Identification Number C	
City Plantation	State FL	Zip Code 33313-4571	Amount of Each Disbursement this Period 1350.14	
Purpose of Disbursement Credit Card Payment - See Below			Transaction ID : 500738955	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1350.14
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Costco Wholesale Corporation		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2026
Mailing Address PO Box 34331		FEC Identification Number C
City Seattle	State WA	Zip Code 98124-1331
Purpose of Disbursement Refreshments - Officially Connected		Amount of Each Disbursement this Period 374.69
Candidate Name		Transaction ID : 500738954
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) B. Tatte Holdings LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2026
Mailing Address 101 Main St Ste 100		FEC Identification Number C
City Cambridge	State MA	Zip Code 02142-1591
Purpose of Disbursement Catering - Officially Connected		Amount of Each Disbursement this Period 975.45
Candidate Name		Transaction ID : 500738953
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026
Mailing Address 1801 NW 66th Ave Ste 103C		FEC Identification Number C
City Plantation	State FL	Zip Code 33313-4571
Purpose of Disbursement Credit Card Payment - See Below		Amount of Each Disbursement this Period 11878.87
Candidate Name		Transaction ID : 500740888
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	11878.87
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026
Mailing Address PO Box 619616		FEC Identification Number C
City Dallas	State TX	Zip Code 75261-9616
Purpose of Disbursement Travel - Officially Connected		Amount of Each Disbursement this Period 1295.64
Candidate Name		Transaction ID : 500740886
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) B. Costco Wholesale Corporation		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026
Mailing Address PO Box 34331		FEC Identification Number C
City Seattle	State WA	Zip Code 98124-1331
Purpose of Disbursement Refreshments - Officially Connected		Amount of Each Disbursement this Period 216.52
Candidate Name		Transaction ID : 500740887
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026
Mailing Address 1776 K St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20006-2304
Purpose of Disbursement Travel - Officially Connected		Amount of Each Disbursement this Period 1035.80
Candidate Name		Transaction ID : 500740885
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Faith & Politics Institute		Date of Disbursement MM / DD / YYYY 03 / 12 / 2026
Mailing Address Suite 304		FEC Identification Number C
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Travel - Officially Connected		Amount of Each Disbursement this Period 1725.00
Candidate Name		Transaction ID : 500740884
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) B. Lansdowne Resort & Spa		Date of Disbursement MM / DD / YYYY 03 / 12 / 2026
Mailing Address 44050 Woodridge Pkwy		FEC Identification Number C
City Leesburg	State VA	Zip Code 20176-5103
Purpose of Disbursement Lodging for Staff - Officially Connected		Amount of Each Disbursement this Period 7100.00
Candidate Name		Transaction ID : 500740883
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) C. Luna Hall		Date of Disbursement MM / DD / YYYY 03 / 12 / 2026
Mailing Address 625 H St NW		FEC Identification Number C
City Washington	State DC	Zip Code 20001-3731
Purpose of Disbursement Meals - Officially Connected		Amount of Each Disbursement this Period 260.19
Candidate Name		Transaction ID : 500740882
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial) A. Ted's Bulletin		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2026
Mailing Address 505 8th St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-2835
Purpose of Disbursement Meals - Officially Connected		Amount of Each Disbursement this Period 245.72
Candidate Name		Transaction ID : 500740881
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item *
State: District:		

Full Name (Last, First, Middle Initial) B. Faith & Politics Institute		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2026
Mailing Address Suite 304		FEC Identification Number C
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Travel - Officially Connected		Amount of Each Disbursement this Period 3930.00
Candidate Name		Transaction ID : 500738885
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Friends of Rachel R. Jones		Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2026
Mailing Address PO Box 188		FEC Identification Number C
City Owings	State MD	Zip Code 20736-0188
Purpose of Disbursement Nonfederal Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name		Transaction ID : 500740321
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	4930.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 34	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Hoyer for Congress

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Lansdowne Resort & Spa		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Mailing Address 44050 Woodridge Pkwy		<input type="text"/> 01 / <input type="text"/> 30 / <input type="text"/> 2026
City Leesburg	State VA	Zip Code 20176-5103
Purpose of Disbursement Lodging for Member - Officially Connected		FEC Identification Number <input type="text"/> C <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/> 2075.00
State: <input type="text"/> District: <input type="text"/>		Transaction ID : 500738569
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement
B.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		FEC Identification Number <input type="text"/> C <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: <input type="text"/> District: <input type="text"/>		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
Mailing Address		
City	State	Zip Code
Purpose of Disbursement		FEC Identification Number <input type="text"/> C <input type="text"/>
Candidate Name		Amount of Each Disbursement this Period <input type="text"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: <input type="text"/> District: <input type="text"/>		

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text"/> 2075.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/> 25225.38