

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

MCBRIDE FOR CA-09 REPUBLICAN NOMINEE FUND 2026

ADDRESS (number and street)

421 OFFICE PARK DR

Check if different
than previously
reported. (ACC)

MOUNTAIN BROOK

AL

35223

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00895151

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

CA

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

04 / 01 / 2026

through

M M / D D / Y Y Y Y

06 / 15 / 2026

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

Type or Print Name of Treasurer KOWALSKI, TREVOR, , ,

Signature of Treasurer

KOWALSKI, TREVOR, , ,

Date

M M / D D / Y Y Y Y

06 / 15 / 2026

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

MCBRIDE FOR CA-09 REPUBLICAN NOMINEE FUND 2026

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 15 / 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))	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	1416.25	2103.92
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1416.25	2103.92
8. Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
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

MCBRIDE FOR CA-09 REPUBLICAN NOMINEE FUND 2026

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
06 / 15 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

(ii) Unitemized.....

(iii) TOTAL of contributions
from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs).....

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

13. LOANS:

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

(b) All Other Loans.....

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)15. OTHER RECEIPTS
(Dividends, Interest, etc.)16. **TOTAL RECEIPTS** (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

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.....

1416.25

2103.92

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

19882.14

19882.14

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0.00

0.00

21. OTHER DISBURSEMENTS

0.00

0.00

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

21298.39

21986.06

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

15341.03

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

5957.36

25. SUBTOTAL (add Line 23 and Line 24).....

21298.39

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

21298.39

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

0.00

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

PAGE 5 OF 7

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

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

NAME OF COMMITTEE (In Full)

MCBRIDE FOR CA-09 REPUBLICAN NOMINEE FUND 2026

Full Name (Last, First, Middle Initial)

DEFEND OUR MAJORITY

A.

Mailing Address 320 FIRST ST SE

City

WASHINGTON

State

DC

Zip Code

20003-1838

FEC ID number of contributing
federal political committee.**C** C00895821

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

5957.36

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		05		2026

Transaction ID : SA12.792304

Amount of Each Receipt this Period

5957.36

☐ Memo Item

TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B.

Full Name (Last, First, Middle Initial)

SMITH, MICHAEL, S., ,

Mailing Address 333 CLAY STREET
SUITE 5050

City

HOUSTON

State

TX

Zip Code

77002-4101

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

Name of Employer

Occupation

FREEPORT LNG

CHAIRMAN AND CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		29		2025

Transaction ID : SA12.792305

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: DEFEND OUR MAJORITY

C.

Full Name (Last, First, Middle Initial)

UIHLEIN, ELIZABETH, A., MRS.,

Mailing Address 12757 ULIN DR

City

PLEASANT PRAIRIE

State

WI

Zip Code

53158-

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

Name of Employer

Occupation

ULINE

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		02		2026

Transaction ID : SA12.792306

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

JFC ATTRIB: DEFEND OUR MAJORITY

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

5957.36

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

5957.36

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

PAGE 6 OF 7

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MCBRIDE FOR CA-09 REPUBLICAN NOMINEE FUND 2026

Full Name (Last, First, Middle Initial)

A. CROSBY OTTENHOFF GROUP

Mailing Address 421 OFFICE PARK DRIVE

City
MOUNTAIN BROOKState
ALZip Code
35223Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1391.25

Transaction ID : SB21B.132270

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

1391.25

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

1391.25

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

PAGE 7 OF 7

☐ 17 20a	☒ 18 20b	☐ 19a 20c	☐ 19b 21
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NAME OF COMMITTEE (In Full)

MCBRIDE FOR CA-09 REPUBLICAN NOMINEE FUND 2026

Full Name (Last, First, Middle Initial)

A. JOHN MCBRIDE FOR CONGRESS

Mailing Address 2427 ROCKINGHAM CIRCLE

Date of Disbursement

M M / D D / Y Y Y Y
06 / 11 / 2026

City
LODIState
CAZip Code
95242

FEC Identification Number

C C00846873

Purpose of Disbursement
TRANSFER TO AFFILIATED COMMITTEECandidate Name
MCBRIDE, JOHN, , ,Category/
Type

Amount of Each Disbursement this Period

19882.14

Transaction ID : SB22.I32271

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 09

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M / D D / Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M / D D / Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

19882.14

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

19882.14