



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

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

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2026"/>  |                         | 46843.69                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 48383.51                |                                   |
| (c) Total Receipts (from Line 19) .....  | 10378.41                | 19918.23                          |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 58761.92                | 66761.92                          |
| 7. Total Disbursements (from Line 31).....   | 2250.00                 | 10250.00                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 56511.92                | 56511.92                          |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                   |

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 5295.28                       | 14077.55                          |
| (ii) Unitemized .....   | 65.00                         | 801.82                            |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 5360.28                       | 14879.37                          |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 5360.28                       | 14879.37                          |
| 12. Transfers From Affiliated/Other Party Committees.....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....  | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 5000.00                       | 5000.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 18.13                         | 38.86                             |
| 18. Transfers from Non-Federal and Levin Funds  |                               |                                   |
| (a) Non-Federal Account (from Schedule H3).....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....  | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..   | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶                         | 10378.41                      | 19918.23                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 10378.41                      | 19918.23                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 0.00                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....                | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. 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 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 2250.00                       | 10250.00                          |
| 30. Federal Election Activity (52 U.S.C. § 30101(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....            | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 2250.00                       | 10250.00                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 2250.00                       | 10250.00                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 5360.28                               | 14879.37                                  |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 5360.28                               | 14879.37                                  |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                                  | 0.00                                      |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0.00                                  | 0.00                                      |

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

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

FOR LINE NUMBER: PAGE 6 OF 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. ADAMS, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 223 REILY ST  
 City HARRISBURG    State PA    Zip Code 17102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC.    Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 349.02

Date of Receipt 04 / 30 / 2026  
**Transaction ID : B000208S000001L11A1**  
 Amount of Each Receipt this Period 64.12  
 Memo Item  
**PAYROLL DEDUCTION**

**B. ADAMS, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 223 REILY ST  
 City HARRISBURG    State PA    Zip Code 17102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC.    Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 349.02

Date of Receipt 05 / 14 / 2026  
**Transaction ID : B000211S000001L11A1**  
 Amount of Each Receipt this Period 32.06  
 Memo Item  
**PAYROLL DEDUCTION**

**C. ADAMS, ANDREW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 223 REILY ST  
 City HARRISBURG    State PA    Zip Code 17102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC.    Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 349.02

Date of Receipt 05 / 21 / 2026  
**Transaction ID : B000212S000001L11A1**  
 Amount of Each Receipt this Period 32.06  
 Memo Item  
**PAYROLL DEDUCTION**

**SUBTOTAL** of Receipts This Page (optional).....▶ 128.24  
**TOTAL** This Period (last page this line number only).....▶

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 7 OF 38  |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. BAIRD, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5302 SARDIS ROAD  
 City MURRYSVILLE State PA Zip Code 15668  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 449.73

Date of Receipt 04 / 30 / 2026  
**Transaction ID : B000208S000002L11A1**  
 Amount of Each Receipt this Period 82.62  
 Memo Item  
**PAYROLL DEDUCTION**

**B. BAIRD, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5302 SARDIS ROAD  
 City MURRYSVILLE State PA Zip Code 15668  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 449.73

Date of Receipt 05 / 14 / 2026  
**Transaction ID : B000211S000002L11A1**  
 Amount of Each Receipt this Period 41.31  
 Memo Item  
**PAYROLL DEDUCTION**

**C. BAIRD, STEVEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5302 SARDIS ROAD  
 City MURRYSVILLE State PA Zip Code 15668  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 449.73

Date of Receipt 05 / 21 / 2026  
**Transaction ID : B000212S000002L11A1**  
 Amount of Each Receipt this Period 41.31  
 Memo Item  
**PAYROLL DEDUCTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 165.24 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |              |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 8 OF 38 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. BARRETT, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 59 SUMMER DR  
 City DILLSBURG    State PA    Zip Code 17019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC.    Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 403.70

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000003L11A1**  
 Amount of Each Receipt this Period 74.04  
 Memo Item  
**PAYROLL DEDUCTION**

**B. BARRETT, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 59 SUMMER DR  
 City DILLSBURG    State PA    Zip Code 17019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC.    Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 403.70

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000003L11A1**  
 Amount of Each Receipt this Period 37.02  
 Memo Item  
**PAYROLL DEDUCTION**

**C. BARRETT, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 59 SUMMER DR  
 City DILLSBURG    State PA    Zip Code 17019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC.    Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 403.70

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000003L11A1**  
 Amount of Each Receipt this Period 37.02  
 Memo Item  
**PAYROLL DEDUCTION**

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 148.08 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 9 OF 38                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. BRAJKOVICH, BRADEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2681 SOUTH COURSE DRIVE  
 City POMPANO BEACH State FL Zip Code 33069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000004L11A1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**PAYROLL DEDUCTION**

**B. BRAJKOVICH, BRADEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2681 SOUTH COURSE DRIVE  
 City POMPANO BEACH State FL Zip Code 33069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000004L11A1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
**PAYROLL DEDUCTION**

**C. BRAJKOVICH, BRADEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2681 SOUTH COURSE DRIVE  
 City POMPANO BEACH State FL Zip Code 33069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000004L11A1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
**PAYROLL DEDUCTION**

**SUBTOTAL** of Receipts This Page (optional).....▶ 100.00  
**TOTAL** This Period (last page this line number only).....▶

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 10 OF 38                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. BRITT, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 ARIEL COURT  
 City MECHANICSBURG State PA Zip Code 17055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) CEO/PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 903.85

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000005L11A1**  
 Amount of Each Receipt this Period 167.10  
 Memo Item  
**PAYROLL DEDUCTION**

**B. BRITT, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 ARIEL COURT  
 City MECHANICSBURG State PA Zip Code 17055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) CEO/PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 903.85

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000005L11A1**  
 Amount of Each Receipt this Period 83.55  
 Memo Item  
**PAYROLL DEDUCTION**

**C. BRITT, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 585 ARIEL COURT  
 City MECHANICSBURG State PA Zip Code 17055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) CEO/PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 903.85

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000005L11A1**  
 Amount of Each Receipt this Period 83.55  
 Memo Item  
**PAYROLL DEDUCTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 334.20 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 11 OF 38   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. CARR, STACEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 186 WOODRUFF DR  
 City SLIDELL State LA Zip Code 70461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 421.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000006L11A1**  
 Amount of Each Receipt this Period 77.28  
 Memo Item  
**PAYROLL DEDUCTION**

**B. CARR, STACEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 186 WOODRUFF DR  
 City SLIDELL State LA Zip Code 70461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 421.36

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000006L11A1**  
 Amount of Each Receipt this Period 38.64  
 Memo Item  
**PAYROLL DEDUCTION**

**C. CARR, STACEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 186 WOODRUFF DR  
 City SLIDELL State LA Zip Code 70461  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 421.36

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000006L11A1**  
 Amount of Each Receipt this Period 38.64  
 Memo Item  
**PAYROLL DEDUCTION**

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 154.56 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 12 OF 38 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
CRIDER, ADRIENNE, , ,

Mailing Address 234 GREEN LANE DR

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>CAMP HILL | State<br>PA | Zip Code<br>17011 |
|-------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.94

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 30    |   | 2026        |

Transaction ID : **B000208S000007L11A1**

Amount of Each Receipt this Period  
69.08

Memo Item  
PAYROLL DEDUCTION

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
CRIDER, ADRIENNE, , ,

Mailing Address 234 GREEN LANE DR

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>CAMP HILL | State<br>PA | Zip Code<br>17011 |
|-------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.94

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2026        |

Transaction ID : **B000211S000007L11A1**

Amount of Each Receipt this Period  
34.54

Memo Item  
PAYROLL DEDUCTION

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
CRIDER, ADRIENNE, , ,

Mailing Address 234 GREEN LANE DR

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>CAMP HILL | State<br>PA | Zip Code<br>17011 |
|-------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
370.94

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 21    |   | 2026        |

Transaction ID : **B000212S000007L11A1**

Amount of Each Receipt this Period  
34.54

Memo Item  
PAYROLL DEDUCTION

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 138.16 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 13 OF 38                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. CROOP, BRADLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 E ORANGE ST  
 City ELIZABETHTOWN State PA Zip Code 17022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) VICE PRESIDENT & DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.14

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000008L11A1**  
 Amount of Each Receipt this Period 96.16  
 Memo Item  
**PAYROLL DEDUCTION**

**B. CROOP, BRADLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 E ORANGE ST  
 City ELIZABETHTOWN State PA Zip Code 17022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) VICE PRESIDENT & DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.14

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000008L11A1**  
 Amount of Each Receipt this Period 48.08  
 Memo Item  
**PAYROLL DEDUCTION**

**C. CROOP, BRADLY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 40 E ORANGE ST  
 City ELIZABETHTOWN State PA Zip Code 17022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) VICE PRESIDENT & DIRECTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 520.14

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000008L11A1**  
 Amount of Each Receipt this Period 48.08  
 Memo Item  
**PAYROLL DEDUCTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 192.32 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 14 OF 38                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. DALLOS, TIBOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 KINGS ARMS  
 City MECHANICSBURG State PA Zip Code 17050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) INFORMATION TECHNOLOGY DIREC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.34

Date of Receipt 04 / 30 / 2026  
**Transaction ID : B000208S000009L11A1**  
 Amount of Each Receipt this Period 79.20  
 Memo Item  
**PAYROLL DEDUCTION**

**B. DALLOS, TIBOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 KINGS ARMS  
 City MECHANICSBURG State PA Zip Code 17050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) INFORMATION TECHNOLOGY DIREC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.34

Date of Receipt 05 / 14 / 2026  
**Transaction ID : B000211S000009L11A1**  
 Amount of Each Receipt this Period 39.60  
 Memo Item  
**PAYROLL DEDUCTION**

**C. DALLOS, TIBOR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19 KINGS ARMS  
 City MECHANICSBURG State PA Zip Code 17050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) INFORMATION TECHNOLOGY DIREC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.34

Date of Receipt 05 / 21 / 2026  
**Transaction ID : B000212S000009L11A1**  
 Amount of Each Receipt this Period 39.60  
 Memo Item  
**PAYROLL DEDUCTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 158.40 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 15 OF 38   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. DOUGHTY, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 RUNNING SPRINGS CT  
 City CLAYTON State NC Zip Code 27527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) CHIEF OPERATING OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000010L11A1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**PAYROLL DEDUCTION**

**B. DOUGHTY, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 RUNNING SPRINGS CT  
 City CLAYTON State NC Zip Code 27527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) CHIEF OPERATING OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000010L11A1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
**PAYROLL DEDUCTION**

**C. DOUGHTY, JASON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 RUNNING SPRINGS CT  
 City CLAYTON State NC Zip Code 27527  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) CHIEF OPERATING OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000010L11A1**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
**PAYROLL DEDUCTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 100.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 16 OF 38   |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. EGENRIEDER, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 CUSTER DRIVE  
 City EAST BERLIN State PA Zip Code 17316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) CFO/TREASURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 767.58

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000011L11A1**  
 Amount of Each Receipt this Period 141.24  
 Memo Item  
 PAYROLL DEDUCTION

**B. EGENRIEDER, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 CUSTER DRIVE  
 City EAST BERLIN State PA Zip Code 17316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) CFO/TREASURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 767.58

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000011L11A1**  
 Amount of Each Receipt this Period 70.62  
 Memo Item  
 PAYROLL DEDUCTION

**C. EGENRIEDER, JEFF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 CUSTER DRIVE  
 City EAST BERLIN State PA Zip Code 17316  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) CFO/TREASURER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 767.58

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000011L11A1**  
 Amount of Each Receipt this Period 70.62  
 Memo Item  
 PAYROLL DEDUCTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 282.48 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 17 OF 38 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. FLANDERS, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2785 HOLLY POINT ROAD EAST  
 City ORANGE PARK State FL Zip Code 32073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 541.54

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000012L11A1**  
 Amount of Each Receipt this Period 99.32  
 Memo Item  
 PAYROLL DEDUCTION

**B. FLANDERS, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2785 HOLLY POINT ROAD EAST  
 City ORANGE PARK State FL Zip Code 32073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 541.54

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000012L11A1**  
 Amount of Each Receipt this Period 49.66  
 Memo Item  
 PAYROLL DEDUCTION

**C. FLANDERS, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2785 HOLLY POINT ROAD EAST  
 City ORANGE PARK State FL Zip Code 32073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 541.54

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000012L11A1**  
 Amount of Each Receipt this Period 49.66  
 Memo Item  
 PAYROLL DEDUCTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 198.64 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 18 OF 38   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. FOREST, GEOFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 BEVERLY ROAD  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 369.44

Date of Receipt 04 / 30 / 2026  
 Transaction ID : **B000208S000013L11A1**  
 Amount of Each Receipt this Period 67.76  
 Memo Item  
 PAYROLL DEDUCTION

**B. FOREST, GEOFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 BEVERLY ROAD  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 369.44

Date of Receipt 05 / 14 / 2026  
 Transaction ID : **B000211S000013L11A1**  
 Amount of Each Receipt this Period 33.88  
 Memo Item  
 PAYROLL DEDUCTION

**C. FOREST, GEOFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 BEVERLY ROAD  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 369.44

Date of Receipt 05 / 21 / 2026  
 Transaction ID : **B000212S000013L11A1**  
 Amount of Each Receipt this Period 33.88  
 Memo Item  
 PAYROLL DEDUCTION

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 135.52 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 19 OF 38   |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. HAYNES, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1551 RIVERTRACE DRIVE  
 City FLEMING ISLAND State FL Zip Code 32003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 363.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000014L11A1**  
 Amount of Each Receipt this Period 66.00  
 Memo Item  
**PAYROLL DEDUCTION**

**B. HAYNES, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1551 RIVERTRACE DRIVE  
 City FLEMING ISLAND State FL Zip Code 32003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 363.00

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000014L11A1**  
 Amount of Each Receipt this Period 33.00  
 Memo Item  
**PAYROLL DEDUCTION**

**C. HAYNES, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1551 RIVERTRACE DRIVE  
 City FLEMING ISLAND State FL Zip Code 32003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 363.00

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000014L11A1**  
 Amount of Each Receipt this Period 33.00  
 Memo Item  
**PAYROLL DEDUCTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 132.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 20 OF 38   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. JACKSON, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 KIETRO DR

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>LINWOOD | State<br>NJ | Zip Code<br>08221 |
|-----------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
566.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026

**Transaction ID : B000208S000015L11A1**

Amount of Each Receipt this Period  
103.84

Memo Item  
PAYROLL DEDUCTION

**B. JACKSON, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 KIETRO DR

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>LINWOOD | State<br>NJ | Zip Code<br>08221 |
|-----------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
566.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 14 / 2026

**Transaction ID : B000211S000015L11A1**

Amount of Each Receipt this Period  
51.92

Memo Item  
PAYROLL DEDUCTION

**C. JACKSON, RICHARD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 309 KIETRO DR

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>LINWOOD | State<br>NJ | Zip Code<br>08221 |
|-----------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
566.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2026

**Transaction ID : B000212S000015L11A1**

Amount of Each Receipt this Period  
51.92

Memo Item  
PAYROLL DEDUCTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 207.68 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 21 OF 38                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. JOHNS, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1171 GREENFIELD DR  
 City MECHANICSBURG State PA Zip Code 17055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 665.20

Date of Receipt 04 / 30 / 2026  
**Transaction ID : B000208S000016L11A1**  
 Amount of Each Receipt this Period 122.40  
 Memo Item  
**PAYROLL DEDUCTION**

**B. JOHNS, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1171 GREENFIELD DR  
 City MECHANICSBURG State PA Zip Code 17055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 665.20

Date of Receipt 05 / 14 / 2026  
**Transaction ID : B000211S000016L11A1**  
 Amount of Each Receipt this Period 61.20  
 Memo Item  
**PAYROLL DEDUCTION**

**C. JOHNS, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1171 GREENFIELD DR  
 City MECHANICSBURG State PA Zip Code 17055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 665.20

Date of Receipt 05 / 21 / 2026  
**Transaction ID : B000212S000016L11A1**  
 Amount of Each Receipt this Period 61.20  
 Memo Item  
**PAYROLL DEDUCTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 244.80 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 22 OF 38   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
KANGER, DAVID, , ,

Mailing Address 505 ELSIE LANE

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>RIVER RIDGE | State<br>LA | Zip Code<br>70123 |
|---------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
392.58

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 30    | / | 2026        |

Transaction ID : **B000208S000017L11A1**

Amount of Each Receipt this Period  
71.76

Memo Item  
PAYROLL DEDUCTION

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
KANGER, DAVID, , ,

Mailing Address 505 ELSIE LANE

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>RIVER RIDGE | State<br>LA | Zip Code<br>70123 |
|---------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
392.58

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 14    | / | 2026        |

Transaction ID : **B000211S000017L11A1**

Amount of Each Receipt this Period  
35.88

Memo Item  
PAYROLL DEDUCTION

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
KANGER, DAVID, , ,

Mailing Address 505 ELSIE LANE

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>RIVER RIDGE | State<br>LA | Zip Code<br>70123 |
|---------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
392.58

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 21    | / | 2026        |

Transaction ID : **B000212S000017L11A1**

Amount of Each Receipt this Period  
35.88

Memo Item  
PAYROLL DEDUCTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 143.52 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 23 OF 38   |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. KOBER, AARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 ADDISON ST  
 City COLLINSVILLE State IL Zip Code 62234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : B000208S000018L11A1**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
**PAYROLL DEDUCTION**

**B. KOBER, AARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 ADDISON ST  
 City COLLINSVILLE State IL Zip Code 62234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 14 / 2026  
**Transaction ID : B000211S000018L11A1**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
**PAYROLL DEDUCTION**

**C. KOBER, AARON, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7 ADDISON ST  
 City COLLINSVILLE State IL Zip Code 62234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 21 / 2026  
**Transaction ID : B000212S000018L11A1**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
**PAYROLL DEDUCTION**

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 80.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 24 OF 38 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. LEDET, CULLEN, , ,**

Mailing Address 3442 CYPRESS STREET

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>METAIRIE | State<br>LA | Zip Code<br>70001 |
|------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
527.05

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 30    |   | 2026        |

**Transaction ID : B000208S000019L11A1**

Amount of Each Receipt this Period  
96.98

Memo Item  
PAYROLL DEDUCTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. LEDET, CULLEN, , ,**

Mailing Address 3442 CYPRESS STREET

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>METAIRIE | State<br>LA | Zip Code<br>70001 |
|------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
527.05

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2026        |

**Transaction ID : B000211S000019L11A1**

Amount of Each Receipt this Period  
48.49

Memo Item  
PAYROLL DEDUCTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. LEDET, CULLEN, , ,**

Mailing Address 3442 CYPRESS STREET

|                  |             |                   |
|------------------|-------------|-------------------|
| City<br>METAIRIE | State<br>LA | Zip Code<br>70001 |
|------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
527.05

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 21    |   | 2026        |

**Transaction ID : B000212S000019L11A1**

Amount of Each Receipt this Period  
48.49

Memo Item  
PAYROLL DEDUCTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 193.96 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 25 OF 38                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. LENTZ, LEE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2921 BEVERLY RD  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 492.35

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000020L11A1**  
 Amount of Each Receipt this Period 90.30  
 Memo Item  
**PAYROLL DEDUCTION**

**B. LENTZ, LEE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2921 BEVERLY RD  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 492.35

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000020L11A1**  
 Amount of Each Receipt this Period 45.15  
 Memo Item  
**PAYROLL DEDUCTION**

**C. LENTZ, LEE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2921 BEVERLY RD  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 492.35

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000020L11A1**  
 Amount of Each Receipt this Period 45.15  
 Memo Item  
**PAYROLL DEDUCTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 180.60 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 26 OF 38                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. MILES, JASON, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 415 DELARONDE ST

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>NEW ORLEANS | State<br>LA | Zip Code<br>70114 |
|---------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
402.22

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 30    |   | 2026        |

**Transaction ID : B000208S000021L11A1**

Amount of Each Receipt this Period  
74.36

Memo Item  
PAYROLL DEDUCTION

**B. MILES, JASON, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 415 DELARONDE ST

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>NEW ORLEANS | State<br>LA | Zip Code<br>70114 |
|---------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
402.22

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2026        |

**Transaction ID : B000211S000021L11A1**

Amount of Each Receipt this Period  
37.18

Memo Item  
PAYROLL DEDUCTION

**C. MILES, JASON, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 415 DELARONDE ST

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>NEW ORLEANS | State<br>LA | Zip Code<br>70114 |
|---------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
402.22

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 21    |   | 2026        |

**Transaction ID : B000212S000021L11A1**

Amount of Each Receipt this Period  
37.18

Memo Item  
PAYROLL DEDUCTION

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 148.72 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 27 OF 38   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. MILLER, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4610 ORLEANS AVENUE  
 City NEW ORLEANS State LA Zip Code 70119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.86

Date of Receipt 04 / 30 / 2026  
 Transaction ID : **B000208S000022L11A1**  
 Amount of Each Receipt this Period 74.80  
 Memo Item  
 PAYROLL DEDUCTION

**B. MILLER, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4610 ORLEANS AVENUE  
 City NEW ORLEANS State LA Zip Code 70119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.86

Date of Receipt 05 / 14 / 2026  
 Transaction ID : **B000211S000022L11A1**  
 Amount of Each Receipt this Period 37.40  
 Memo Item  
 PAYROLL DEDUCTION

**C. MILLER, MATTHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4610 ORLEANS AVENUE  
 City NEW ORLEANS State LA Zip Code 70119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) SENIOR PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.86

Date of Receipt 05 / 21 / 2026  
 Transaction ID : **B000212S000022L11A1**  
 Amount of Each Receipt this Period 37.40  
 Memo Item  
 PAYROLL DEDUCTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 149.60 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 28 OF 38                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. MURPHY, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2715 LOGAN ST  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000023L11A1**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
**PAYROLL DEDUCTION**

**B. MURPHY, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2715 LOGAN ST  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000023L11A1**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
**PAYROLL DEDUCTION**

**C. MURPHY, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2715 LOGAN ST  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) OFFICER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000023L11A1**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
**PAYROLL DEDUCTION**

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 300.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 29 OF 38                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NEWMAN, JEFFREY, , ,

Mailing Address 100 SPANGLER RD

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>LEBANON | State<br>PA | Zip Code<br>17042 |
|-----------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
498.73

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 30    |   | 2026        |

**Transaction ID : B000208S000024L11A1**

Amount of Each Receipt this Period  
91.62

Memo Item  
PAYROLL DEDUCTION

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NEWMAN, JEFFREY, , ,

Mailing Address 100 SPANGLER RD

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>LEBANON | State<br>PA | Zip Code<br>17042 |
|-----------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
498.73

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2026        |

**Transaction ID : B000211S000024L11A1**

Amount of Each Receipt this Period  
45.81

Memo Item  
PAYROLL DEDUCTION

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NEWMAN, JEFFREY, , ,

Mailing Address 100 SPANGLER RD

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>LEBANON | State<br>PA | Zip Code<br>17042 |
|-----------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
498.73

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 21    |   | 2026        |

**Transaction ID : B000212S000024L11A1**

Amount of Each Receipt this Period  
45.81

Memo Item  
PAYROLL DEDUCTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 183.24 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 30 OF 38   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. OUYANG, YU, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2866 CHERRY BRANCH LANE  
 City OAK HILL State VA Zip Code 20171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 639.67

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : B000208S000025L11A1**  
 Amount of Each Receipt this Period 118.26  
 Memo Item  
**PAYROLL DEDUCTION**

**B. OUYANG, YU, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2866 CHERRY BRANCH LANE  
 City OAK HILL State VA Zip Code 20171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 639.67

Date of Receipt **05 / 14 / 2026**  
**Transaction ID : B000211S000025L11A1**  
 Amount of Each Receipt this Period 59.13  
 Memo Item  
**PAYROLL DEDUCTION**

**C. OUYANG, YU, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2866 CHERRY BRANCH LANE  
 City OAK HILL State VA Zip Code 20171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) OFFICER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 639.67

Date of Receipt **05 / 21 / 2026**  
**Transaction ID : B000212S000025L11A1**  
 Amount of Each Receipt this Period 59.13  
 Memo Item  
**PAYROLL DEDUCTION**

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 236.52 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 31 OF 38 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. PRICE, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 186 ABBY ROAD  
 City FALLS State PA Zip Code 18615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.52

Date of Receipt 04 / 30 / 2026  
**Transaction ID : B000208S000026L11A1**  
 Amount of Each Receipt this Period 64.56  
 Memo Item  
**PAYROLL DEDUCTION**

**B. PRICE, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 186 ABBY ROAD  
 City FALLS State PA Zip Code 18615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.52

Date of Receipt 05 / 14 / 2026  
**Transaction ID : B000211S000026L11A1**  
 Amount of Each Receipt this Period 32.28  
 Memo Item  
**PAYROLL DEDUCTION**

**C. PRICE, MICHELLE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 186 ABBY ROAD  
 City FALLS State PA Zip Code 18615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 340.52

Date of Receipt 05 / 21 / 2026  
**Transaction ID : B000212S000026L11A1**  
 Amount of Each Receipt this Period 32.28  
 Memo Item  
**PAYROLL DEDUCTION**

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 129.12 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 32 OF 38   |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
RAMPERSAD, LAURA, , ,

Mailing Address 597 PRESTWICK AVE SE

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>GRAND RAPIDS | State<br>MI | Zip Code<br>49546 |
|----------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.53

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 30    | / | 2026        |

**Transaction ID : B000208S000027L11A1**

Amount of Each Receipt this Period  
38.46

Memo Item  
PAYROLL DEDUCTION

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
RAMPERSAD, LAURA, , ,

Mailing Address 597 PRESTWICK AVE SE

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>GRAND RAPIDS | State<br>MI | Zip Code<br>49546 |
|----------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.53

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 14    | / | 2026        |

**Transaction ID : B000211S000027L11A1**

Amount of Each Receipt this Period  
19.23

Memo Item  
PAYROLL DEDUCTION

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
RAMPERSAD, LAURA, , ,

Mailing Address 597 PRESTWICK AVE SE

|                      |             |                   |
|----------------------|-------------|-------------------|
| City<br>GRAND RAPIDS | State<br>MI | Zip Code<br>49546 |
|----------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>SENIOR PROJECT MANAGER |
|--|---|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
211.53

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 21    | / | 2026        |

**Transaction ID : B000212S000027L11A1**

Amount of Each Receipt this Period  
19.23

Memo Item  
PAYROLL DEDUCTION

|   |       |
|---|-------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 76.92 |
| <b>TOTAL</b> This Period (last page this line number only)..... |       |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 33 OF 38 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. SCHINDLER, NEWELL, , , JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1447 FILMORE AVE.

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>NEW ORLEANS | State<br>LA | Zip Code<br>70122 |
|---------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>PROJECT MANAGER |
|--|--|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.82

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 30    |   | 2026        |

**Transaction ID : B000208S000029L11A1**

Amount of Each Receipt this Period  
70.76

Memo Item  
PAYROLL DEDUCTION

**B. SCHINDLER, NEWELL, , , JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1447 FILMORE AVE.

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>NEW ORLEANS | State<br>LA | Zip Code<br>70122 |
|---------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>PROJECT MANAGER |
|--|--|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
385.82

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2026        |

**Transaction ID : B000211S000029L11A1**

Amount of Each Receipt this Period  
35.38

Memo Item  
PAYROLL DEDUCTION

**C. SCHINDLER, NEWELL, , , JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1447 FILMORE AVE.

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>NEW ORLEANS | State<br>LA | Zip Code<br>70122 |
|---------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>PROJECT MANAGER |
|--|--|

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
385.82

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 21    |   | 2026        |

**Transaction ID : B000212S000029L11A1**

Amount of Each Receipt this Period  
35.38

Memo Item  
PAYROLL DEDUCTION

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 141.52 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 34 OF 38 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SCHOENECKER, ANTHONY, , ,**

Mailing Address 5351 CHESTNUT STREET

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>NEW ORLEANS | State<br>LA | Zip Code<br>70115 |
|---------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VP ASST DIR |
|--|--|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
514.71

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 30    |   | 2026        |

**Transaction ID : B000208S000030L11A1**

Amount of Each Receipt this Period  
94.86

Memo Item  
PAYROLL DEDUCTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. SCHOENECKER, ANTHONY, , ,**

Mailing Address 5351 CHESTNUT STREET

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>NEW ORLEANS | State<br>LA | Zip Code<br>70115 |
|---------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VP ASST DIR |
|--|--|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
514.71

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2026        |

**Transaction ID : B000211S000030L11A1**

Amount of Each Receipt this Period  
47.43

Memo Item  
PAYROLL DEDUCTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SCHOENECKER, ANTHONY, , ,**

Mailing Address 5351 CHESTNUT STREET

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>NEW ORLEANS | State<br>LA | Zip Code<br>70115 |
|---------------------|-------------|-------------------|

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

|  |  |
|--|--|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VP ASST DIR |
|--|--|

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
514.71

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 21    |   | 2026        |

**Transaction ID : B000212S000030L11A1**

Amount of Each Receipt this Period  
47.43

Memo Item  
PAYROLL DEDUCTION

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 189.72 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 35 OF 38 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
SMITH, CHRISTOPHER, , ,

Mailing Address 692 CHRISTIANS DRIVE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>HARRISBURG | State<br>PA | Zip Code<br>17112 |
|--------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
522.04

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    |   | 30    |   | 2026        |

**Transaction ID : B000208S000031L11A1**

Amount of Each Receipt this Period  
96.80

Memo Item  
PAYROLL DEDUCTION

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
SMITH, CHRISTOPHER, , ,

Mailing Address 692 CHRISTIANS DRIVE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>HARRISBURG | State<br>PA | Zip Code<br>17112 |
|--------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
522.04

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 14    |   | 2026        |

**Transaction ID : B000211S000031L11A1**

Amount of Each Receipt this Period  
48.40

Memo Item  
PAYROLL DEDUCTION

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
SMITH, CHRISTOPHER, , ,

Mailing Address 692 CHRISTIANS DRIVE

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>HARRISBURG | State<br>PA | Zip Code<br>17112 |
|--------------------|-------------|-------------------|

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

|  |   |
|--|---|
| Name of Employer (for Individual)<br>MODJESKI AND MASTERS INC. | Occupation (for Individual)<br>VICE PRESIDENT |
|--|---|

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
522.04

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    |   | 21    |   | 2026        |

**Transaction ID : B000212S000031L11A1**

Amount of Each Receipt this Period  
48.40

Memo Item  
PAYROLL DEDUCTION

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 193.60 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |  |               |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)  | PAGE 36 OF 38 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. THRONE, SHAWN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 TAPEWORM RD  
 City NEW BLOOMFIELD State PA Zip Code 17068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 348.72

Date of Receipt 04 / 30 / 2026  
**Transaction ID : B000208S000032L11A1**  
 Amount of Each Receipt this Period 63.96  
 Memo Item  
**PAYROLL DEDUCTION**

**B. THRONE, SHAWN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 TAPEWORM RD  
 City NEW BLOOMFIELD State PA Zip Code 17068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 348.72

Date of Receipt 05 / 14 / 2026  
**Transaction ID : B000211S000032L11A1**  
 Amount of Each Receipt this Period 31.98  
 Memo Item  
**PAYROLL DEDUCTION**

**C. THRONE, SHAWN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 125 TAPEWORM RD  
 City NEW BLOOMFIELD State PA Zip Code 17068  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MODJESKI AND MASTERS INC. Occupation (for Individual) PROJECT MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 348.72

Date of Receipt 05 / 21 / 2026  
**Transaction ID : B000212S000032L11A1**  
 Amount of Each Receipt this Period 31.98  
 Memo Item  
**PAYROLL DEDUCTION**

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 127.92  |
| <b>TOTAL</b> This Period (last page this line number only)..... | 5295.28 |

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

|   |                              |                                   |  |
|---|------------------------------|-----------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 37 OF 38                          |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12            |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input checked="" type="checkbox"/> 16 |
|   |                              |                                   | <input type="checkbox"/> 17            |

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NAME OF COMMITTEE (In Full)  
**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

**A. BURLINGTON COUNTY DEMOCRATIC COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2190

|                     |             |                   |
|---------------------|-------------|-------------------|
| City<br>CINNAMINSON | State<br>NJ | Zip Code<br>08077 |
|---------------------|-------------|-------------------|

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

|                                   |                             |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼  
 EXPLORATORY CMTE

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2026

**Transaction ID : B000216S000001L16**

Amount of Each Receipt this Period  
5000.00

Memo Item  
 CONTRIBUTION REFUND FROM COMMITTEE C1043

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

|                                   |                             |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-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 of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

|      |       |          |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

|                                   |                             |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... | 5000.00 |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**MODJESKI AND MASTERS, INC. TRANSPORTATION ALLIANCE PAC**

Full Name (Last, First, Middle Initial)

## A. ASCE LOUISIANA SECTION

Mailing Address LOUISIANA ENGINEERING SOCIETY  
1800 CITY FARM DR, BLDG 5, STE B

City BATON ROUGE State LA Zip Code 70806

Purpose of Disbursement  
2026 ANNUAL/OTHER

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2026  
 Primary  General  
 Other (specify) ANNUAL/OTHER

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2026

FEC Identification Number

C  
Transaction ID : B000214S000  
Amount of Each Disbursement this Period  
750.00

Memo Item

Full Name (Last, First, Middle Initial)

## B. FRIENDS OF FRANK FARRY

Mailing Address PO BOX 412

City HARRISBURG State PA Zip Code 17108

Purpose of Disbursement  
PA STATE SENATE, DISTRICT 6

011  
Category/  
Type

Candidate Name

FARRY, FRANK, , ,

Office Sought:  House  Senate  President  
State: PA District: 06

Disbursement For: 2026  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
05 / 26 / 2026

FEC Identification Number

C  
Transaction ID : B000215S000  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

## C. MONMOUTH COUNTY REPUBLICAN COMMITTEE

Mailing Address 206 COUNTY ROAD 537

City COLTS NECK State NJ Zip Code 07722

Purpose of Disbursement  
2026 ANNUAL/OTHER

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: NJ District:

Disbursement For: 2026  
 Primary  General  
 Other (specify) ANNUAL/OTHER

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2026

FEC Identification Number

C  
Transaction ID : B000213S000  
Amount of Each Disbursement this Period  
500.00

Memo Item

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

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

2250.00  
2250.00