

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

Office Use Only

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

12FE4M5

Kennedy Victory Fund 2024

ADDRESS (number and street)

PO Box 147

Check if different  
than previously  
reported. (ACC)

South Walpole

MA

02071-0147

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00883751

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer

Cox, Ellie, , ,

Signature of Treasurer

Cox, Ellie, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Kennedy Victory Fund 2024Report Covering the Period: From: 

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 04  |   | 01  |   | 2025      |

 To: 

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 06  |   | 30  |   | 2025      |

|                                                                                                                  | COLUMN A<br>This Period                    | COLUMN B<br>Calendar Year-to-Date           |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------|---------------------------------------------|
| 6. (a) Cash on Hand<br>January 1, <div><div>Y Y Y Y Y</div><div>2025</div></div>                                 |                                            | <div><div></div><div>122580.44</div></div>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | <div><div></div><div>480458.32</div></div> |                                             |
| (c) Total Receipts (from Line 19) .....                                                                          | <div><div></div><div>110.73</div></div>    | <div><div></div><div>3613575.71</div></div> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <div><div></div><div>480569.05</div></div> | <div><div></div><div>3736156.15</div></div> |
| 7. Total Disbursements (from Line 31) .....                                                                      | <div><div></div><div>480569.05</div></div> | <div><div></div><div>3736156.15</div></div> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <div><div></div><div>0.00</div></div>      | <div><div></div><div>0.00</div></div>       |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <div><div></div><div>0.00</div></div>      |                                             |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <div><div></div><div>0.00</div></div>      |                                             |



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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Kennedy Victory Fund 2024

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
04 / 01 / 2025

To:

M M / D D / Y Y Y Y Y  
06 / 30 / 2025**I. Receipts****COLUMN A**  
Total This Period**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

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

100.00

3609418.08

(ii) Unitemized .....

10.73

4157.63

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

110.73

3613575.71

(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) .....

110.73

3613575.71

## 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.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 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)) .....

110.73

3613575.71

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

110.73

3613575.71

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| 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 .....                                                 | 23884.30                      | 495842.40                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 23884.30                      | 495842.40                         |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 456674.02                     | 3239303.02                        |
| 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 .....                                  | 10.73                         | 1010.73                           |
| (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)).....                            | 10.73                         | 1010.73                           |
| 29. Other Disbursements (Including Non-Federal Donations).....                                 | 0.00                          | 0.00                              |
| 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)) ..      | 480569.05                     | 3736156.15                        |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 480569.05                     | 3736156.15                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....         | 110.73                                | 3613575.71                                |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                             | 10.73                                 | 1010.73                                   |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....     | 100.00                                | 3612564.98                                |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) .....▶ | 23884.30                              | 495842.40                                 |
| 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) .....▶              | 23884.30                              | 495842.40                                 |

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 16  
(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)

Kennedy Victory Fund 2024

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

**A.** Ellis, Sharon, , ,

Mailing Address 14675 Orchard Knob Rd

City  
DallasState  
ORZip Code  
97338-9618FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2025

Transaction ID : A3EA1F2D3CC204F34897

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B.**

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

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

**C.**

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

100.00

100.00

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

PAGE 7 OF 16

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A. Amalgamated Bank**

Mailing Address 50 Park Plz

City  
BostonState  
MAZip Code  
02116-4004

Purpose of Disbursement

Bank Fee

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : BF33978494C

Amount of Each Disbursement this Period

405.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anedot**

Mailing Address 1340 Poydras St

City  
New OrleansState  
LAZip Code  
70112-1221

Purpose of Disbursement

Merchant Service Fee

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B5223E0734C

Amount of Each Disbursement this Period

4.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot**

Mailing Address 1340 Poydras St

City  
New OrleansState  
LAZip Code  
70112-1221

Purpose of Disbursement

Merchant Service Fee

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : BE805393A6

Amount of Each Disbursement this Period

0.73

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

410.03

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

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

PAGE 8 OF 16

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A. Holloway Law Office, LLC**Mailing Address 6710 Oxon Hill Rd  
Suite 210City  
Oxon HillState  
MDZip Code  
20745-1124

Purpose of Disbursement

Legal Services

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B89F15E94E1

Amount of Each Disbursement this Period

3350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Holloway Law Office, LLC**Mailing Address 6710 Oxon Hill Rd  
Suite 210City  
Oxon HillState  
MDZip Code  
20745-1124

Purpose of Disbursement

Legal Services

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 1 | 8 |   |   | 2 | 0 | 2 | 5 |   |

FEC Identification Number

C

Transaction ID : B5CC9E3B3C

Amount of Each Disbursement this Period

5850.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Holloway Law Office, LLC**Mailing Address 6710 Oxon Hill Rd  
Suite 210City  
Oxon HillState  
MDZip Code  
20745-1124

Purpose of Disbursement

Legal Services

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 2 |   |   | 2 | 0 | 2 | 5 |   |

FEC Identification Number

C

Transaction ID : BAAC806E61

Amount of Each Disbursement this Period

1450.00

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

10650.00

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



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

PAGE 9 OF 16

|                                         |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A. Verdolino & Lowey, PC**Mailing Address 124 Washington St  
Suite 101City  
FoxboroState  
MAZip Code  
02035-1368

Purpose of Disbursement

Professional Services - Accounting &amp; Compliance

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : BDEAB97826

Amount of Each Disbursement this Period

5530.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Verdolino & Lowey, PC**Mailing Address 124 Washington St  
Suite 101City  
FoxboroState  
MAZip Code  
02035-1368

Purpose of Disbursement

Professional Services - Accounting &amp; Compliance

Candidate Name

001

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 5 |   |   | 0 | 8 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C

Transaction ID : B7951089589

Amount of Each Disbursement this Period

7294.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

12824.27

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

23884.30

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

PAGE 10 OF 16

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A. Free New Mexico Party**Mailing Address 7800 Phoenix Ave NE  
Ste CCity  
AlbuquerqueState  
NMZip Code  
87110-3761

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Free New Mexico Party

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00890210

Transaction ID : B9959D3EFD

Amount of Each Disbursement this Period

17054.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Libertarian National Committee, Inc.**

Mailing Address 1444 Duke St

City  
AlexandriaState  
VAZip Code  
22314-3403

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Libertarian National Committee, Inc.

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00255695

Transaction ID : B35AAEED75

Amount of Each Disbursement this Period

133695.46

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Libertarian Party of California**Mailing Address 428 J St  
Ste 400City  
SacramentoState  
CAZip Code  
95814-2394

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Libertarian Party of California

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00736173

Transaction ID : B29D0058A1

Amount of Each Disbursement this Period

24806.89

☐ Memo Item

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

175556.73

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

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

PAGE 11 OF 16

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A. Libertarian Party Of Colorado**Mailing Address 7650 W 68TH AVE  
APT 304City  
ARVADAState  
COZip Code  
80004

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Libertarian Party Of Colorado

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00623397

Transaction ID : B2C51E00D5

Amount of Each Disbursement this Period

24806.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Libertarian Party Of Connecticut**

Mailing Address PO Box 310811

City  
NewingtonState  
CTZip Code  
06131-0811

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Libertarian Party Of Connecticut

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00886671

Transaction ID : B42371D5826

Amount of Each Disbursement this Period

24806.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Libertarian Party of Georgia**Mailing Address 285 W WIEUCA RD  
PMB 5238City  
ATLANTAState  
GAZip Code  
30342

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Libertarian Party of Georgia

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00622795

Transaction ID : BD998CF0E0

Amount of Each Disbursement this Period

24806.87

☐ Memo Item

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

74420.69

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

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

PAGE 12 OF 16

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A. Libertarian Party of Idaho**Mailing Address 9169 W State St  
# 1743City  
Garden CityState  
IDZip Code  
83714-1733

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Libertarian Party of Idaho

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00897975

Transaction ID : BF712337303

Amount of Each Disbursement this Period

15826.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Libertarian Party of Maine**

Mailing Address PO BOX 13

City  
BANGORState  
MEZip Code  
04401

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Libertarian Party of Maine

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00899625

Transaction ID : B016C91F83F

Amount of Each Disbursement this Period

15826.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Libertarian Party of Maryland**

Mailing Address 7640 4TH STREET

City  
PASADENAState  
MDZip Code  
21122

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Libertarian Party of Maryland

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00894477

Transaction ID : BBF4529565

Amount of Each Disbursement this Period

24884.91

☐ Memo Item

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

56538.70

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

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

PAGE 13 OF 16

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A. Libertarian Party Of Michigan Executive Committee, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

Mailing Address P.O. Box 614

City  
Royal OakState  
MIZip Code  
48068-0614

FEC Identification Number

**C** C00403907**Transaction ID : B95C5589452**

Amount of Each Disbursement this Period

24806.91

☐ Memo Item

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Category/  
Type

Candidate Name

Libertarian Party Of Michigan Executive Committee, Inc.

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. Libertarian Party Of Nebraska**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

Mailing Address PO Box 460626

City  
PapillionState  
NEZip Code  
68046-0626

FEC Identification Number

**C** C00887760**Transaction ID : B8B0785E3A1**

Amount of Each Disbursement this Period

24806.91

☐ Memo Item

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Category/  
Type

Candidate Name

Libertarian Party Of Nebraska

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. Libertarian Party of Vermont**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

Mailing Address 451 WILSON RD

City  
JOHNSONState  
VTZip Code  
05656

FEC Identification Number

**C** C00900662**Transaction ID : B6FD42DC5f**

Amount of Each Disbursement this Period

15826.91

☐ Memo Item

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Category/  
Type

Candidate Name

Libertarian Party of Vermont

Office Sought:

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

Disbursement For:

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

State:

District:

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

65440.73

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

PAGE 14 OF 16

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A. Libertarian Unity**

Mailing Address 14900 Avery Ranch Blvd

City  
AustinState  
TXZip Code  
78717-3951

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Libertarian Unity

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00891176

Transaction ID : BE78CC9E87

Amount of Each Disbursement this Period

1166.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mises PAC**

Mailing Address PO Box 414

City  
Honey BrookState  
PAZip Code  
19344-0414

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Mises PAC

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00699785

Transaction ID : BA1B446787

Amount of Each Disbursement this Period

1166.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Montana Libertarian Party**

Mailing Address 4313 Linney Rd

City  
BozemanState  
MTZip Code  
59718-8551

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Montana Libertarian Party

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00889006

Transaction ID : BCEFF960C1

Amount of Each Disbursement this Period

24877.22

☐ Memo Item

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

27211.08

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

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

PAGE 15 OF 16

|                              |                                        |                              |                             |                              |
|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" 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 type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A. Team Kennedy**

Mailing Address PO Box 147

City  
South WalpoleState  
MAZip Code  
02071-0147

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Kennedy, Robert, F., , Jr.

Category/  
Type

Office Sought:

|                                     |           |
|-------------------------------------|-----------|
| <input type="checkbox"/>            | House     |
| <input type="checkbox"/>            | Senate    |
| <input checked="" type="checkbox"/> | President |

Disbursement For:

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

State: ZZ

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00836916

Transaction ID : B24D544687/

Amount of Each Disbursement this Period

7892.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Libertarian Party Of Hawaii**

Mailing Address PO Box 4444

City  
HonoluluState  
HIZip Code  
96812-4444

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

The Libertarian Party Of Hawaii

Category/  
Type

Office Sought:

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

Disbursement For:

|                          |                 |                          |         |
|--------------------------|-----------------|--------------------------|---------|
| <input type="checkbox"/> | Primary         | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00887869

Transaction ID : B7DA26D437/

Amount of Each Disbursement this Period

24806.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Unified Libertarians Of Massachusetts**

Mailing Address 93 Silverwood Dr

City  
TauntonState  
MAZip Code  
02780-4389

Purpose of Disbursement

Transfer of Joint Fundraising Proceeds

008

Candidate Name

Unified Libertarians Of Massachusetts

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 |   |   | 0 | 9 |   |   | 2 | 0 | 2 | 5 |   |   |

FEC Identification Number

C C00876144

Transaction ID : BB292A8FB/

Amount of Each Disbursement this Period

24806.91

☐ Memo Item

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

57506.09

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

456674.02

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

PAGE 16 OF 16

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

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)

Kennedy Victory Fund 2024

Full Name (Last, First, Middle Initial)

**A.** Norckauer, Melissa, , ,

Mailing Address 302 Brocade Ct

City  
Peachtree CityState  
GAZip Code  
30269-2453

Purpose of Disbursement

Refund of Contribution

Candidate Name

010

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : BDDC095AF4

Amount of Each Disbursement this Period

10.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

|                          |                 |                          |         |
|--------------------------|-----------------|--------------------------|---------|
| <input type="checkbox"/> | Primary         | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) |                          |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

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

10.73

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

10.73