FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **TYPE OR PRINT ▼** — Example: If typing, type over the lines. 12FE4M5

FAT MATT SMITH FOR CONGRESS

ADDRESS (number and street) ▼

PO BOX 5005

☐ Check if different than previously reported. (ACC)

ABILENE | TX | 79605

CITY ▲ | STATE ▲ | ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00929604

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

STATE ▼ DISTRICT: TX 19

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

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

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on M M / D D / Y Y Y Y in the State of

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

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 02/12/2026 through 03/31/2026

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

Type or Print Name of Treasurer: PLISHKA, JOHN, , ,

Signature of Treasurer: *PLISHKA, JOHN, , ,* Date: 04/15/2026

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

Office Use Only							

Image# 202604159862587613

SUMMARY PAGE
of Receipts and Disbursements

FEC **Form 3** (Revised 03/2016)

Write or Type Committee Name

FAT MATT SMITH FOR CONGRESS

Report Covering the Period: From: 02 / 12 / 2026 To: 03 / 31 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	22303.57	56368.40
(b) Total Contribution Refunds (from Line 20(d))	6541.02	6541.02
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	15762.55	49827.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	326.07	338920.77
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	326.07	338920.77
8. Cash on Hand at Close of Reporting Period (from Line 27).....	30906.61	
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	320000.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

Image# 202604159862587614

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 05/2016)

Write or Type Committee Name

FAT MATT SMITH FOR CONGRESS

Report Covering the Period: From: 02 / 12 / 2026 To: 03 / 31 / 2026

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	20790.24	46853.45
(ii) Unitemized	513.33	3514.95
(iii) TOTAL of contributions from individuals ▶	21303.57	50368.40
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	1000.00	6000.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	22303.57	56368.40
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	320000.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	320000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	22303.57	376368.40

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3** (Revised 05/2016)

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	326.07	338920.77
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	6541.02	6541.02
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	6541.02	6541.02
21. OTHER DISBURSEMENTS	0.00	0.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	6867.09	345461.79

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	15470.13
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	22303.57
25. SUBTOTAL (add Line 23 and Line 24)	37773.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	6867.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	30906.61

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
BLUHM, BRIAN, , ,
Mailing Address 2069 FM 89
City: BUFFALO GAP | State: TX | Zip Code: 79508-2123
FEC ID number of contributing federal political committee: C
Name of Employer: WORLD WIDE BUSINESS SOLUTIONS
Occupation: OWNER
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1500.00
Date of Receipt: 02 / 25 / 2026
Transaction ID : SA11A.2112
Amount of Each Receipt this Period: 1500.00
☐ Memo Item
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
DUESER, FREDERICK, SCOTT, ,
Mailing Address P.O. BOX 701
City: ABILENE | State: TX | Zip Code: 79604-0701
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED PER BEST EFF(
Occupation: INFORMATION REQUESTED PER BEST EFF
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1500.00
Date of Receipt: 02 / 25 / 2026
Transaction ID : SA11A.2105
Amount of Each Receipt this Period: 1500.00
☐ Memo Item
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
FINELY, PARKER, G., ,
Mailing Address 70 AVENIDA DE SILVA
City: ABILENE | State: TX | Zip Code: 79602-7508
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED PER BEST EFF(
Occupation: INFORMATION REQUESTED PER BEST EFF
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1500.00
Date of Receipt: 02 / 25 / 2026
Transaction ID : SA11A.2110
Amount of Each Receipt this Period: 1500.00
☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 4500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
HIGGINBOTHAM, H., SEATON, ,
Mailing Address 90 ARROW POINT
City: ABILENE | State: TX | Zip Code: 79601-8460
FEC ID number of contributing federal political committee: C
Name of Employer: INFORMATION REQUESTED PER BEST EFFO
Occupation: INFORMATION REQUESTED PER BEST EFF
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 25 / 2026
Transaction ID : SA11A.2106
Amount of Each Receipt this Period: 1000.00
☐ Memo Item
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
HILL, LARRY, L., ,
Mailing Address 1071 NORTH JUDGE ELY BOULEVARD #6424
City: ABILENE | State: TX | Zip Code: 79601-3853
FEC ID number of contributing federal political committee: C
Name of Employer: HILL RESOURCES INC.
Occupation: CEO
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 3500.00

Date of Receipt: 02 / 25 / 2026
Transaction ID : SA11A.2103
Amount of Each Receipt this Period: 3500.00
☐ Memo Item
CONTRIBUTION

C.
Full Name (Last, First, Middle Initial)
KLEMENT, DAVID, WARREN, ,
Mailing Address 2026 PRIMROSE DRIVE
City: IRVING | State: TX | Zip Code: 75063-8438
FEC ID number of contributing federal political committee: C
Name of Employer: SELF
Occupation: ADVERTISING
Receipt For: 2026 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 10041.02

Date of Receipt: 02 / 25 / 2026
Transaction ID : SA11A.2107
Amount of Each Receipt this Period: 9000.00
☐ Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 13500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
RICHERT, DIANA, , ,
Mailing Address 15 GLEN ABBEY STREET
City: ABILENE | State: TX | Zip Code: 79606-5023
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED | Occupation: RETIRED
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 02 / 25 / 2026
Transaction ID : SA11A.2111
Amount of Each Receipt this Period: 500.00
☐ Memo Item
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
WINRED
Mailing Address 4250 FAIRFAX DR STE 600
City: ARLINGTON | State: VA | Zip Code: 22203-1665
FEC ID number of contributing federal political committee: C C00694323
Name of Employer: | Occupation:
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 22098.61

Date of Receipt: 02 / 16 / 2026
Transaction ID : SA11C.2077
Amount of Each Receipt this Period: 208.20
☒ Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

C.
Full Name (Last, First, Middle Initial)
WAGGONER, FERAY, , ,
Mailing Address 149 CEDAR RIDGE RD
City: TUSCOLA | State: TX | Zip Code: 79562-3661
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED | Occupation: MARKETING
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 208.20

Date of Receipt: 02 / 16 / 2026
Transaction ID : SA11A.2078
Amount of Each Receipt this Period: 208.20
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

SUBTOTAL of Receipts This Page (optional) ▶ 708.20

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d ☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
WINRED
Mailing Address 4250 FAIRFAX DR
STE 600
City: ARLINGTON | State: VA | Zip Code: 22203-1665
FEC ID number of contributing federal political committee: C C00694323
Name of Employer:
Occupation:
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 22098.61

Date of Receipt: 02 / 17 / 2026
Transaction ID : SA11C.2079
Amount of Each Receipt this Period: 1041.02
☒ Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B.
Full Name (Last, First, Middle Initial)
WRIGHT, ASH, , ,
Mailing Address 134 LINDLEY CT
City: TUSCOLA | State: TX | Zip Code: 79562-3529
FEC ID number of contributing federal political committee: C
Name of Employer: RAW STRATEGIES, LLC
Occupation: PUBLIC RELATIONS
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1041.02

Date of Receipt: 02 / 17 / 2026
Transaction ID : SA11A.2080
Amount of Each Receipt this Period: 1041.02
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

C.
Full Name (Last, First, Middle Initial)
WINRED
Mailing Address 4250 FAIRFAX DR
STE 600
City: ARLINGTON | State: VA | Zip Code: 22203-1665
FEC ID number of contributing federal political committee: C C00694323
Name of Employer:
Occupation:
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 22098.61

Date of Receipt: 02 / 23 / 2026
Transaction ID : SA11C.2101
Amount of Each Receipt this Period: 1041.02
☒ Memo Item
CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional) ▶ 1041.02

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
JONES, STEPHEN, , ,
Mailing Address 11900 MUSKET RIM
City: AUSTIN | State: TX | Zip Code: 78738-6610
FEC ID number of contributing federal political committee: C
Name of Employer: RETIRED | Occupation: RETIRED
Receipt For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼ 1041.02

Date of Receipt: 02 / 23 / 2026
Transaction ID : SA11A.2102
Amount of Each Receipt this Period: 1041.02
☐ Memo Item
CONTRIBUTION
EARMARKED FROM WINRED

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1041.02

TOTAL This Period (last page this line number only) ▶ 20790.24

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
TENNESSEE TOUGH PAC
Mailing Address PO BOX 7208
City: KINGSPORT | State: TN | Zip Code: 37664-1208
FEC ID number of contributing federal political committee: C C00765578
Name of Employer | Occupation
Receipt For: 2026
☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 25 / 2026
Transaction ID : SA11C.2113
Amount of Each Receipt this Period: 1000.00
☐ Memo Item
CONTRIBUTION

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For:
☐ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City | State | Zip Code
FEC ID number of contributing federal political committee: C
Name of Employer | Occupation
Receipt For:
☐ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date

Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 1000.00

Image# 202604159862587622

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CMDI
Mailing Address 1595 SPRING HILL RD STE 500
City: TYSONS CORNER | State: VA | Zip Code: 22182
Purpose of Disbursement: DATABASE MANAGEMENT
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 20 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 50.00
Transaction ID : SB17.02
☐ Memo Item

B. Full Name (Last, First, Middle Initial)
INTUIT
Mailing Address 2700 COAST AVE
City: MOUNTAIN VIEW | State: CA | Zip Code: 94043
Purpose of Disbursement: SOFTWARE SUBSCRIPTION
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 02 / 17 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 57.50
Transaction ID : SB17.01
☐ Memo Item

C. Full Name (Last, First, Middle Initial)
INTUIT
Mailing Address 2700 COAST AVE
City: MOUNTAIN VIEW | State: CA | Zip Code: 94043
Purpose of Disbursement: SOFTWARE SUBSCRIPTION
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 16 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 115.00
Transaction ID : SB17.04
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 222.50

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

Image# 202604159862587623

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
PAGE 12 OF 15

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICES, LLC
Mailing Address 1776 ARLINGTON BLVD
City: ARLINGTON | State: VA | Zip Code: 22209
Purpose of Disbursement: CREDIT CARD MERCHANT FEES
Candidate Name
Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 02 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 103.57
Transaction ID : SB17.03
☐ Memo Item

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

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

SUBTOTAL of Disbursements This Page (optional) ▶ 103.57

TOTAL This Period (last page this line number only) ▶ 326.07

Image# 202604159862587624

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☒ 20a ☐ 20b ☐ 20c ☐ 21

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

A.
Full Name (Last, First, Middle Initial)
KLEMENT, DAVID, WARREN, ,
Mailing Address 2026 PRIMROSE DRIVE
City: IRVING | State: TX | Zip Code: 75063
Purpose of Disbursement:
Candidate Name:
Category/ Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 31 / 2026
FEC Identification Number: C
Amount of Each Disbursement this Period: 6541.02
Transaction ID : SB20A.001
☐ Memo Item

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

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

SUBTOTAL of Disbursements This Page (optional) ▶ 6541.02

TOTAL This Period (last page this line number only) ▶ 6541.02

Image# 202604159862587625

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)
- [X] 13a
- [ ] 13b

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

Transaction ID : SC10.01

LOAN SOURCE Full Name (Last, First, Middle Initial)
SMITH, MATTHEW, , ,

[ ] Memo Item

Mailing Address
PO BOX 5005

City: ABILENE | State: TX | ZIP Code: 79605

Election: 2026
- [X] Primary
- [ ] General
- [ ] Other (specify) ▼

[X] Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	0.00	200000.00

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate (If none, enter 0)	Secured:
12/04/2025	12/31/2026	0.00 % (apr)	[ ] Yes [X] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	200000.00
TOTALS This Period (last page in this line only) ▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Image# 202604159862587626

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)
- [X] 13a
- [ ] 13b

NAME OF COMMITTEE (In Full)
FAT MATT SMITH FOR CONGRESS

Transaction ID : SC10.02

LOAN SOURCE Full Name (Last, First, Middle Initial)
SMITH, MATTHEW, , ,

[ ] Memo Item

Mailing Address
PO BOX 5005

City: ABILENE | State: TX | ZIP Code: 79605

Election: 2026
- [X] Primary
- [ ] General
- [ ] Other (specify) ▼

[X] Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
120000.00	0.00	120000.00

TERMS

Date Incurred (MM/DD/YYYY)	Date Due (MM/DD/YYYY)	Interest Rate (If none, enter 0)	Secured:
02/05/2026	12/31/2026	0.00 % (apr)	[ ] Yes [X] No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

2. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

3. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

4. Full Name (Last, First, Middle Initial)
   Mailing Address
   City | State | ZIP Code
   Name of Employer
   Occupation
   Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶	120000.00
TOTALS This Period (last page in this line only) ▶	320000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.