

**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

Way Back PAC

ADDRESS (number and street)

30 N Gould St

Suite 4205

Sheridan

WY

82801

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00824342

3. IS THIS REPORT

☒

NEW (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

06

D D D

23

Y Y Y Y Y Y Y

2026

in the State of

UT

(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

04

D D D

01

Y Y Y Y Y Y Y

2026

through

M M M

06

D D D

03

Y Y Y Y Y Y Y

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

Lance, Ryan, , ,

Signature of Treasurer

Lance, Ryan, , ,

Date

M M M

06

D D D

11

Y Y Y Y Y Y Y

2026

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Way Back PACReport Covering the Period: From:

M M	D D	Y Y Y Y Y
04	01	2026

 To:

M M	D D	Y Y Y Y Y
06	03	2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		786053.94
(b) Cash on Hand at Beginning of Reporting Period.....	913262.76	
(c) Total Receipts (from Line 19)	1283470.00	2779001.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2196732.76	3565055.54
7. Total Disbursements (from Line 31).....	1513027.57	2881350.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	683705.19	683705.19
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)	1476.28	



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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Way Back PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
04		01		2026

To:

M M	/	D D	/	Y Y Y Y
06		03		2026

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).....	34000.00	83500.00
(ii) Unitemized	0.00	331.25
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	34000.00	83831.25
(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)	34000.00	83831.25
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.).....	1249470.00	2695170.35
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))	1283470.00	2779001.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1283470.00	2779001.60

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B 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	230.26	605.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	230.26	605.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	106000.00
24. Independent Expenditures (use Schedule E)	33262.81	33262.81
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).....	1444534.50	2741481.69
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)) ..	1513027.57	2881350.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1513027.57	2881350.35

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	34000.00	83831.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34000.00	83831.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	230.26	605.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	230.26	605.85

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 56

(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)

Way Back PAC

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

A. Bloomfield, William, E., , Jr.

Mailing Address 3303 SUN RIDGE CT

City
PARK CITY

State
UT

Zip Code
84060-8820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not-Employed

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 21 / 2026

Transaction ID : R-1350248-A

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

B. Cumming, Annette, , ,

Mailing Address P.O. Box 4902

City
Jackson

State
WY

Zip Code
83001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cumming Foundation

Occupation (for Individual)
Board Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 07 / 2026

Transaction ID : R-1292933-A

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

C. Davidson, Suzanne, , ,

Mailing Address 262 CENTRAL PARK W

City
NEW YORK

State
NY

Zip Code
10024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CMS Of Lincoln Center

Occupation (for Individual)
Arts

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 23 / 2026

Transaction ID : R-1352765-A

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

10500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 56
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Way Back PAC

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

A. Gates, Rory, John, ,

Mailing Address 2202 18TH ST NW

City
WASHINGTONState
DCZip Code
20009-1813FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Afghan War CommissionOccupation (for Individual)
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2026**Transaction ID : R-1235900-A**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

B. Maggelet, Charles, , ,

Mailing Address 7864 ASTER LN

City
PARK CITYState
UTZip Code
84036FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not-EmployedOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 06 / 2026**Transaction ID : R-1239516-A**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

C. Mennet, Lisa, , ,

Mailing Address PO Box 70367

City
SEATTLEState
WAZip Code
98127FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cooper HouseOccupation (for Individual)
Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 21 / 2026**Transaction ID : R-1350246-A**

Amount of Each Receipt this Period

5000.00

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

15000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 56
(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Way Back PAC

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

A. Miller, Harrison, , ,

Mailing Address 134 LA GOMA ST

City
MILL VALLEYState
CAZip Code
94941-2111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not-EmployedOccupation (for Individual)
Not-Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 24 / 2026**Transaction ID : R-1352763-A**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

B. Ratner, Austin, , ,

Mailing Address 96 JORALEMON ST

City
BROOKLYNState
NYZip Code
11201-4032FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 06 / 2026**Transaction ID : R-1412272-A**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Stein, Noah, D., ,

Mailing Address 19 W 72ND ST # 124

City
NEW YORKState
NYZip Code
10023FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2026**Transaction ID : R-1258907-A**

Amount of Each Receipt this Period

5000.00

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

8000.00

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

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

FOR LINE NUMBER: PAGE 9 OF 56

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Way Back PAC

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

A. Weiner, Earl, , ,

Mailing Address 272 CENTRAL PARK W
10C

City
NEW YORK

State
NY

Zip Code
10024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not-Employed

Occupation (for Individual)
Not-Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : R-1357759-A

Amount of Each Receipt this Period

500.00

☐ 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)..... ►

500.00

34000.00

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

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

FOR LINE NUMBER: PAGE 10 OF 56
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Way Back PAC

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

A. Bloomfield, William, E., , Jr.

Mailing Address 3303 SUN RIDGE CT

City
PARK CITY

State
UT

Zip Code
84060-8820

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not-Employed

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / **21** / **2026**

Transaction ID : R-1350249-A

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Non-Contribution Account

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

B. Cumming, Annette, , ,

Mailing Address P.O. Box 4902

City
Jackson

State
WY

Zip Code
83001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cumming Foundation

Occupation (for Individual)
Board Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

05 / **07** / **2026**

Transaction ID : R-1292934-A

Amount of Each Receipt this Period

45000.00

☐ Memo Item

Non-Contribution Account

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

C. Davidson, Suzanne, , ,

Mailing Address 262 CENTRAL PARK W

City
NEW YORK

State
NY

Zip Code
10024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CMS Of Lincoln Center

Occupation (for Individual)
Arts

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / **23** / **2026**

Transaction ID : R-1352760-A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

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

55500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 56
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☒ 17
☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

Way Back PAC

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

A. Gates, Rory, John, ,

Mailing Address 2202 18TH ST NW

City
WASHINGTONState
DCZip Code
20009-1813FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Afghan War CommissionOccupation (for Individual)
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2026**Transaction ID : R-1226819-A**

Amount of Each Receipt this Period

245000.00

☐ Memo Item

Non-Contribution Account

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

B. Maggelet, Charles, , ,

Mailing Address 7864 ASTER LN

City
PARK CITYState
UTZip Code
84036FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Not-EmployedOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 06 / 2026**Transaction ID : R-1235899-A**

Amount of Each Receipt this Period

20000.00

☐ Memo Item

Non-Contribution Account

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

C. Martens4Senate

Mailing Address 644 PO Box

City
ForsythState
MTZip Code
59327FEC 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 ▼

470.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2026**Transaction ID : R-1341515-A**

Amount of Each Receipt this Period

470.00

☐ Memo Item

Return of Contribution - Non-Contribution Account

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

265470.00

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

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

FOR LINE NUMBER: PAGE 12 OF 56
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Way Back PAC

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

A. Mennet, Lisa, , ,

Mailing Address PO Box 70367

City
SEATTLE

State
WA

Zip Code
98127

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cooper House

Occupation (for Individual)
Therapist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

95000.00

Date of Receipt

05 / 21 / 2026

Transaction ID : R-1350247-A

Amount of Each Receipt this Period

95000.00

☐ Memo Item

Non-Contribution Account

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

B. Miller, Harrison, , ,

Mailing Address 134 LA GOMA ST

City
MILL VALLEY

State
CA

Zip Code
94941-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Not-Employed

Occupation (for Individual)
Not-Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

04 / 24 / 2026

Transaction ID : R-1352764-A

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Non-Contribution Account

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

C. North Fund

Mailing Address 1828 L ST NW
300-F

City
WASHINGTON

State
DC

Zip Code
20036-5104

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 ▼

300000.00

Date of Receipt

06 / 02 / 2026

Transaction ID : R-1357758-A

Amount of Each Receipt this Period

300000.00

☐ Memo Item

Non-Contribution Account

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

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

397500.00

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

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

FOR LINE NUMBER: PAGE 13 OF 56
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Way Back PAC

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

A. Pritzker, Regan, , ,

Mailing Address 1 Letterman Dr

City
San Francisco

State
CA

Zip Code
94129

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Tao Capital Partners LLC

Occupation (for Individual)
Director of Impact Investing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

04 / **02** / **2026**

Transaction ID : R-1235901-A

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Non-Contribution Account

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

B. Ratner, Austin, , ,

Mailing Address 96 JORALEMON ST

City
BROOKLYN

State
NY

Zip Code
11201-4032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / **06** / **2026**

Transaction ID : R-1352759-A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

C. Stein, Noah, D., ,

Mailing Address 19 W 72ND ST # 124

City
NEW YORK

State
NY

Zip Code
10023

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

70000.00

Date of Receipt

04 / **13** / **2026**

Transaction ID : R-1258900-A

Amount of Each Receipt this Period

70000.00

☐ Memo Item

Non-Contribution Account

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

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

120500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 56
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☒ 17
☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

Way Back PAC

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

A. Stein, Noah, D., ,

Mailing Address 19 W 72ND ST # 124

City
NEW YORKState
NYZip Code
10023FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Self-EmployedOccupation (for Individual)
Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2026**Transaction ID : R-1352762-A**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

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

B. Toolbox

Mailing Address 7507 PO Box

City
ArlingtonState
VAZip Code
22207FEC 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 ▼

300000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2026**Transaction ID : R-1282505-A**

Amount of Each Receipt this Period

300000.00

☐ Memo Item

Non-Contribution Account

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

C. Tullman, Glen, , ,Mailing Address 250 E PEARSON ST
APT 1205City
CHICAGOState
ILZip Code
60611-7225FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
TransarentOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026**Transaction ID : R-1357757-A**

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Non-Contribution Account

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

330000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 15 OF 56
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☒ 17			

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NAME OF COMMITTEE (In Full)

Way Back PAC

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

A. Unite America PAC Inc.Mailing Address 1550 LARIMER ST.
PO BOX 258City
DENVERState
COZip Code
80202FEC ID number of contributing
federal political committee.**C**

C00677773

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2026**Transaction ID : R-1352758-A**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Non-Contribution Account

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

B. Weiner, Earl, , ,Mailing Address 272 CENTRAL PARK W
10CCity
NEW YORKState
NYZip Code
10024FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Not-EmployedOccupation (for Individual)
Not-Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026**Transaction ID : R-1357760-A**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Non-Contribution Account

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

C. Western Futures Fund

Mailing Address 30 N Gould St

City
SheridanState
WYZip Code
82801-6317FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1075000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : R-1357756-A**

Amount of Each Receipt this Period

75000.00

☐ Memo ItemIn-Kind; Earmarked for Lynne Walz (NE - Gov) - Non-
Contribution Account**SUBTOTAL** of Receipts This Page (optional)..... ►

80500.00

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

1249470.00

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

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Oath.Vote

Mailing Address 8 THE GRN # B

City
DOVERState
DEZip Code
19901

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	4		2	0	2	6		

FEC Identification Number

C

Transaction ID : D-37029-B

Amount of Each Disbursement this Period

18.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Oath.Vote

Mailing Address 8 THE GRN # B

City
DOVERState
DEZip Code
19901

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1		2	0	2	6		

FEC Identification Number

C

Transaction ID : D-35959-B

Amount of Each Disbursement this Period

50.01

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Oath.Vote

Mailing Address 8 THE GRN # B

City
DOVERState
DEZip Code
19901

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	8		2	0	2	6		

FEC Identification Number

C

Transaction ID : D-35960-B

Amount of Each Disbursement this Period

111.02

☐ Memo Item

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

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

179.54

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

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☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Oath.Vote

Mailing Address 8 THE GRN # B

City
DOVERState
DEZip Code
19901

Purpose of Disbursement

Credit Card Processing Fee

Candidate Name

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	5			0	4			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36078-B

Amount of Each Disbursement this Period

18.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

18.51

198.05

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

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☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Backemeyer For Nebraska

Mailing Address PO BOX 6124

City
LINCOLNState
NEZip Code
68506

Purpose of Disbursement

Contribution to Committee

Candidate Name

BACKEMEYER, CHRISTOPHER, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: NE

District: 01

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	4		2	0	2	6		

FEC Identification Number

C C00925750**Transaction ID : D-35945-B**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Don Coover For Congress

Mailing Address 101 W 29TH ST STE G, #285

City
PITTSBURGState
KSZip Code
66762

Purpose of Disbursement

Contribution to Committee

Candidate Name

COOVER, DON, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: KS

District: 02

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2		2	0	2	6		

FEC Identification Number

C C00917088**Transaction ID : D-35946-B**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Josh Turek For Iowa

Mailing Address PO BOX 1005

City
COUNCIL BLUFFSState
IAZip Code
51502

Purpose of Disbursement

Contribution to Committee

Candidate Name

TUREK, JOSHUA, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA

District: 00

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	3		2	0	2	6		

FEC Identification Number

C C00915645**Transaction ID : D-37076-B**

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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

PAGE 19 OF 56

☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Lindsay For Iowa

Mailing Address PO BOX 144

City
DUBUQUEState
IAZip Code
52004

Purpose of Disbursement

Contribution to Committee

Candidate Name

JAMES, LINDSAY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: IA

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			0	3			2	0	2	6		

FEC Identification Number

C C00916452**Transaction ID : D-37077-B**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sharice For CongressMailing Address 13851 W. 63RD ST.
NUM 303City
SHAWNEEState
KSZip Code
66216

Purpose of Disbursement

Contribution to Committee

Candidate Name

DAVIDS, SHARICE, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: KS

District: 03

Date of Disbursement

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

FEC Identification Number

C C00670034**Transaction ID : D-36043-B**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Sharice For CongressMailing Address 13851 W. 63RD ST.
NUM 303City
SHAWNEEState
KSZip Code
66216

Purpose of Disbursement

Contribution to Committee

Candidate Name

DAVIDS, SHARICE, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: KS

District: 03

Date of Disbursement

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

FEC Identification Number

C C00670034**Transaction ID : D-36044-B**

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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

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☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Trey Martin For CongressMailing Address 1050 E 2ND ST
#144City
EDMONDState
OKZip Code
73034Purpose of Disbursement
Contribution to Committee

Candidate Name

MARTIN, TREY, . .

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: OK District: 05

Date of Disbursement

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

FEC Identification Number

C C00947069

Transaction ID : D-36045-B

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	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

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	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)..... ►

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

5000.00

35000.00

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001

Purpose of Disbursement

Bank Fees - Non-Contribution Account

Candidate Name

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			2	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-35621-B

Amount of Each Disbursement this Period

66.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001

Purpose of Disbursement

Bank Fees - Non-Contribution Account

Candidate Name

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			2	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-35949-B

Amount of Each Disbursement this Period

34.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001

Purpose of Disbursement

Bank Fees - Non-Contribution Account

Candidate Name

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			2	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-35950-B

Amount of Each Disbursement this Period

36.00

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

136.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001

Purpose of Disbursement

Bank Fees - Non-Contribution Account

Candidate Name

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	5			2	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36063-B

Amount of Each Disbursement this Period

50.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001

Purpose of Disbursement

Bank Fees - Non-Contribution Account

Candidate Name

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	5			2	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36065-B

Amount of Each Disbursement this Period

7.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Amalgamated Bank

Mailing Address 275 7th Ave

City
New YorkState
NYZip Code
10001

Purpose of Disbursement

Bank Fees - Non-Contribution Account

Candidate Name

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	5			2	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36073-B

Amount of Each Disbursement this Period

18.71

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

76.13

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)

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☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Bee Compliance

Mailing Address 611 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

Compliance Consulting - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 13 / 2026

FEC Identification Number

C

Transaction ID : D-34452-B

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bee Compliance

Mailing Address 611 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement

Compliance Consulting - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 14 / 2026

FEC Identification Number

C

Transaction ID : D-36058-B

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Blue Moon Strategies

Mailing Address 7272 Wisconsin Ave
9th Floor

City
Bethesda

State
MD

Zip Code
20814

Purpose of Disbursement

Strategic Consulting - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 02 / 2026

FEC Identification Number

C

Transaction ID : D-34449-B

Amount of Each Disbursement this Period

3005.73

☐ Memo Item

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

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

11005.73

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)

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Blue Moon Strategies

Mailing Address 7272 Wisconsin Ave
9th Floor

City
Bethesda

State
MD

Zip Code
20814

Purpose of Disbursement

Strategic Consulting - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : D-36054-B

Amount of Each Disbursement this Period

3015.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blue Moon Strategies

Mailing Address 7272 Wisconsin Ave
9th Floor

City
Bethesda

State
MD

Zip Code
20814

Purpose of Disbursement

SMS Texting - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 28 / 2026

FEC Identification Number

C

Transaction ID : D-36062-B

Amount of Each Disbursement this Period

408.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Blue Moon Strategies

Mailing Address 7272 Wisconsin Ave
9th Floor

City
Bethesda

State
MD

Zip Code
20814

Purpose of Disbursement

In-Kind to Non-Fed Committee - Digital Advertising - Non-Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 29 / 2026

FEC Identification Number

C

Transaction ID : D-35980-B

Amount of Each Disbursement this Period

17000.00

UT - Evan Done (SD-13)

☐ Memo Item

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

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

20423.41

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Blue Moon StrategiesMailing Address 7272 Wisconsin Ave
9th FloorCity
BethesdaState
MDZip Code
20814

Purpose of Disbursement

Strategic Consulting - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : D-36064-B

Amount of Each Disbursement this Period

3135.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blueprint Public Affairs

Mailing Address 968 N Terrace Hills Dr

City
Salt Lake CityState
UTZip Code
84103-4005

Purpose of Disbursement

Strategic Consulting - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	8			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-36068-B

Amount of Each Disbursement this Period

2056.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Conservatives 4 Montana

Mailing Address 7843 PO Box

City
HelenaState
MTZip Code
59604

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-35955-B

Amount of Each Disbursement this Period

150000.00

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

155192.52

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Conservatives 4 Montana

Mailing Address 7843 PO Box

City
HelenaState
MTZip Code
59604

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-36060-B

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Corporate Filings LLC

Mailing Address 30 N Gould St

City
SheridanState
WYZip Code
82801-6317

Purpose of Disbursement

Filing Fee - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	1			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-36066-B

Amount of Each Disbursement this Period

15.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Defend and Protect Idaho

Mailing Address PO Box 162

City
BoiseState
IDZip Code
83701

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-36052-B

Amount of Each Disbursement this Period

100000.00

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

200015.62

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Defend and Protect Idaho

Mailing Address PO Box 162

City
BoiseState
IDZip Code
83701

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-36055-B

Amount of Each Disbursement this Period

150000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Defend and Protect Idaho

Mailing Address PO Box 162

City
BoiseState
IDZip Code
83701

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	5			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-36059-B

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fight For Nebraska PAC

Mailing Address 390021 PO Box

City
OmahaState
NEZip Code
68139

Purpose of Disbursement

Contribution to Committee - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

Other

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-35953-B

Amount of Each Disbursement this Period

155000.00

☐ Memo Item

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

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

405000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Friends of Jayme Davis

Mailing Address 601 JOHN ST

City
ROLETTEState
NDZip Code
58366-7209

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

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			1	6			2	0	6			

FEC Identification Number

C**Transaction ID : D-35620-B**

Amount of Each Disbursement this Period

7500.00

☐ Memo Item ND - Jayme Davis (SD-09)

Full Name (Last, First, Middle Initial)

B. Godaddy.com

Mailing Address 2155 E Go Daddy Way

City
TempeState
AZZip Code
85284-3409

Purpose of Disbursement

Web Services - Non-Contribution Account

Candidate Name

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	5			1	5			2	0	6			

FEC Identification Number

C**Transaction ID : D-36069-B**

Amount of Each Disbursement this Period

13.59

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Google LLC

Mailing Address 1600 Amphitheatre Pkwy

City
MountainviewState
CAZip Code
94043

Purpose of Disbursement

Computer Software - Non-Contribution Account

Candidate Name

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	3			2	0	6			

FEC Identification Number

C**Transaction ID : D-34142-B**

Amount of Each Disbursement this Period

24.81

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

7538.40

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Google LLC

Mailing Address 1600 Amphitheatre Pkwy

City
MountainviewState
CAZip Code
94043

Purpose of Disbursement

Computer Software - Non-Contribution Account

Candidate Name

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	5			0	6			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36067-B

Amount of Each Disbursement this Period

24.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Google LLC

Mailing Address 1600 Amphitheatre Pkwy

City
MountainviewState
CAZip Code
94043

Purpose of Disbursement

Computer Software - Non-Contribution Account

Candidate Name

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	6			0	2			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36076-B

Amount of Each Disbursement this Period

24.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Government That Works PAC

Mailing Address 114 PO Box

City
Sioux FallsState
SDZip Code
57101

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

Other

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36051-B

Amount of Each Disbursement this Period

75000.00

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

75049.57

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Grassroots Analytics

Mailing Address 806 7th St NW

City
WashingtonState
DCZip Code
20001-3868

Purpose of Disbursement

List Acquisition - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	5			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-34146-B

Amount of Each Disbursement this Period

709.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hometown Heroes PAC

Mailing Address 1251 PO Box

City
BoiseState
IDZip Code
83701-1251

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify)		

State:

District:

Other

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-35622-B

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Idaho First

Mailing Address PO Box 334

City
BOISEState
IDZip Code
83701

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

Other

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	4			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-36049-B

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

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

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

200709.00

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Intuit

Mailing Address 2700 Coast Ave

City
Mountain ViewState
CAZip Code
94043-1140

Purpose of Disbursement

Computer Software - Non-Contribution Account

Candidate Name

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	5			2	1			2	0	6			

FEC Identification Number

C**Transaction ID : D-36070-B**

Amount of Each Disbursement this Period

873.41

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Janet Bock for Legislature

Mailing Address 13643 W SARGENT RD

City
BEATRICEState
NEZip Code
68310-7056

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

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			1	3			2	0	6			

FEC Identification Number

C**Transaction ID : D-34145-B**

Amount of Each Disbursement this Period

10000.00

NE - Janet Bock (SD-30)

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Leahy For Nebraska

Mailing Address 12811 Izard St

City
OmahaState
NEZip Code
68154

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

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	7			2	0	6			

FEC Identification Number

C**Transaction ID : D-34144-B**

Amount of Each Disbursement this Period

10000.00

NE - Patrick Leahy (SD-06)

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

20873.41

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

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Lisa Dean For Utah State House

Mailing Address 8381 McGregor Ln

City
West JordanState
UTZip Code
84088

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-35954-B

Amount of Each Disbursement this Period

10000.00

☐ Memo Item UT - Lisa Dean (HD-39)

Full Name (Last, First, Middle Initial)

B. Mailchimp

Mailing Address 405 N Angier Ave NE

City
AtlantaState
GAZip Code
30308-3139

Purpose of Disbursement

Email Services - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-36072-B

Amount of Each Disbursement this Period

262.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Montana Freedom PACMailing Address 1319 F ST NW
STE 301 PMB 432City
WASHINGTONState
DCZip Code
20004

Purpose of Disbursement

Contribution to Committee - Non-Contribution Account

Candidate Name

Montana Freedom PAC

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5			2	0	2	6	

FEC Identification Number

C C00943910

Transaction ID : D-36053-B

Amount of Each Disbursement this Period

150000.00

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

160262.50

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Montanans for Responsible Stewardship

Mailing Address PO Box 5192

City
HELENAState
MTZip Code
59604

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		Other

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	4			2	0	6		

FEC Identification Number

C

Transaction ID : D-35952-B

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Oath.Vote

Mailing Address 8 THE GRN # B

City
DOVERState
DEZip Code
19901

Purpose of Disbursement

Credit Card Processing Fee - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	4			2	0	6		

FEC Identification Number

C

Transaction ID : D-35956-B

Amount of Each Disbursement this Period

18.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Oath.Vote

Mailing Address 8 THE GRN # B

City
DOVERState
DEZip Code
19901

Purpose of Disbursement

Credit Card Processing Fee - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	8			2	0	6		

FEC Identification Number

C

Transaction ID : D-35957-B

Amount of Each Disbursement this Period

111.02

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

100129.53

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Oath.Vote

Mailing Address 8 THE GRN # B

City
DOVERState
DEZip Code
19901

Purpose of Disbursement

Credit Card Processing Fee - Non-Contribution Account

Candidate Name

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	5			0	4			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36079-B

Amount of Each Disbursement this Period

18.51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ramp

Mailing Address 28 W 23RD ST # 40

City
NEW YORKState
NYZip Code
10010-5204

Purpose of Disbursement

Payment Processing Fee - Non-Contribution Account

Candidate Name

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	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-34143-B

Amount of Each Disbursement this Period

2.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Scale to Win

Mailing Address 455 MARKET ST STE 1940

City
SAN FRANCISCOState
CAZip Code
94105-2448

Purpose of Disbursement

SMS Texting - Non-Contribution Account

Candidate Name

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	2			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-32742-B

Amount of Each Disbursement this Period

2.96

☐ Memo Item

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

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

24.07

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Scale to Win

Mailing Address 455 MARKET ST STE 1940

City
SAN FRANCISCOState
CAZip Code
94105-2448

Purpose of Disbursement

SMS Texting - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : D-36074-B

Amount of Each Disbursement this Period

298.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tandem Web CO.

Mailing Address 6473 PO Box

City
AustinState
TXZip Code
78762

Purpose of Disbursement

Web Hosting - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-34450-B

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Targetsmart

Mailing Address 5401 S KIRKMAN RD

City
ORLANDOState
FLZip Code
32819-7940

Purpose of Disbursement

Data Services - Non-Contribution Account

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	2	6	

FEC Identification Number

C

Transaction ID : D-36071-B

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

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

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

1448.61

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. WarchestMailing Address 405 WALTHAM ST
Ste 181City
LEXINGTONState
MAZip Code
02421-7934

Purpose of Disbursement

Computer Software - Non-Contribution Account

Candidate Name

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	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-34451-B

Amount of Each Disbursement this Period

550.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WarchestMailing Address 405 WALTHAM ST
Ste 181City
LEXINGTONState
MAZip Code
02421-7934

Purpose of Disbursement

Computer Software - Non-Contribution Account

Candidate Name

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	5			0	4			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36050-B

Amount of Each Disbursement this Period

550.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WarchestMailing Address 405 WALTHAM ST
Ste 181City
LEXINGTONState
MAZip Code
02421-7934

Purpose of Disbursement

Computer Software - Non-Contribution Account

Candidate Name

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	6			0	2			2	0	2	6		

FEC Identification Number

C

Transaction ID : D-36075-B

Amount of Each Disbursement this Period

550.00

☐ Memo Item

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

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

1650.00

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

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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Way Back PAC

Full Name (Last, First, Middle Initial)

A. Western Futures Fund

Mailing Address 30 N Gould St

City
SheridanState
WYZip Code
82801-6317

Purpose of Disbursement

Non-Federal In-Kind - Research Services - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	2			2	0	6		

FEC Identification Number

C

Transaction ID : D-37075-B

Amount of Each Disbursement this Period

75000.00

☐ Memo Item Earmarked for Lynne Walz (NE-Gov)

Full Name (Last, First, Middle Initial)

B. Willems for Iowa

Mailing Address PO Box 151

City
MOUNT VERNONState
IAZip Code
52314

Purpose of Disbursement

Contribution to Non-Federal Committee - Non-Contribution Account

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify)		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	2			2	0	6		

FEC Identification Number

C

Transaction ID : D-36057-B

Amount of Each Disbursement this Period

10000.00

☐ Memo Item IA - Nate Willems (Attorney General)

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	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)..... ►

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

85000.00

1444534.50

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 38 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Way Back PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blueprint Public Affairs

Nature of Debt (Purpose):

Email and SMS Production - Non-Contribution Account

Mailing Address 968 N Terrace Hills Dr

City

Salt Lake City

State

UT

Zip Code

84103-4005

Outstanding Balance Beginning This Period

477.28

Transaction ID : DEBT-27-D10

Amount Incurred This Period

0.00

Payment This Period

477.28

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blueprint Public Affairs

Nature of Debt (Purpose):

Email Services - Non-Contribution Account

Mailing Address 968 N Terrace Hills Dr

City

Salt Lake City

State

UT

Zip Code

84103-4005

Outstanding Balance Beginning This Period

186.00

Transaction ID : DEBT-30-D10

Amount Incurred This Period

0.00

Payment This Period

186.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blueprint Public Affairs

Nature of Debt (Purpose):

Email and SMS Production - Non-Contribution Account

Mailing Address 968 N Terrace Hills Dr

City

Salt Lake City

State

UT

Zip Code

84103-4005

Outstanding Balance Beginning This Period

477.28

Transaction ID : DEBT-28-D10

Amount Incurred This Period

0.00

Payment This Period

477.28

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 39 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Way Back PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blueprint Public Affairs

Nature of Debt (Purpose):

Email Production - Non-Contribution Account

Mailing Address 968 N Terrace Hills Dr

City

Salt Lake City

State

UT

Zip Code

84103-4005

Outstanding Balance Beginning This Period

0.00

Transaction ID : DEBT-48-D10

Amount Incurred This Period

238.64

Payment This Period

0.00

Outstanding Balance at Close of This Period

238.64

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Blueprint Public Affairs

Nature of Debt (Purpose):

SMS Production - Non-Contribution Account

Mailing Address 968 N Terrace Hills Dr

City

Salt Lake City

State

UT

Zip Code

84103-4005

Outstanding Balance Beginning This Period

0.00

Transaction ID : DEBT-49-D10

Amount Incurred This Period

954.56

Payment This Period

0.00

Outstanding Balance at Close of This Period

954.56

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

SMS Texting - Non-Contribution Account

Mailing Address 455 MARKET ST STE 1940

City

SAN FRANCISCO

State

CA

Zip Code

94105-2448

Outstanding Balance Beginning This Period

52.33

Transaction ID : DEBT-25-D10

Amount Incurred This Period

0.00

Payment This Period

52.33

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

1193.20

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 40 OF 56

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Way Back PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

SMS Texting - Non-Contribution Account

Mailing Address 455 MARKET ST STE 1940

City
SAN FRANCISCOState
CAZip Code
94105-2448

Outstanding Balance Beginning This Period

46.44

Transaction ID : DEBT-26-D10

Amount Incurred This Period

0.00

Payment This Period

46.44

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Scale to Win

Nature of Debt (Purpose):

SMS Texting - Non-Contribution Account

Mailing Address 455 MARKET ST STE 1940

City
SAN FRANCISCOState
CAZip Code
94105-2448

Outstanding Balance Beginning This Period

0.00

Transaction ID : DEBT-46-D10

Amount Incurred This Period

283.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

283.08

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

283.08

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

1476.28

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

1476.28

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 41 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Scale to Win ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 28 / 2026	
Mailing Address 455 MARKET ST STE 1940			Amount 298.61	
City SAN FRANCISCO	State CA	Zip Code 94105-2448	Transaction ID : IE-36074-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 02 / 2026	
Purpose of Expenditure SMS Texting - Non-Contribution Account		Category/ Type	Name of Federal Candidate: MCADAMS, BEN, , , ☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 01 State: UT	
Calendar Year-To-Date Per Election for Office Sought 21505.25		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Blue Moon Strategies ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 26 / 2026	
Mailing Address 7272 Wisconsin Ave 9th Floor			Amount 5000.00	
City Bethesda	State MD	Zip Code 20814	Transaction ID : IE-35943-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 26 / 2026	
Purpose of Expenditure Digital Advertisting and Media Production - Non-Contribution Account		Category/ Type	Name of Federal Candidate: MCADAMS, BEN, , , ☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 01 State: UT	
Calendar Year-To-Date Per Election for Office Sought 21505.25		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			5298.61	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Lance, Ryan, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 42 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee Blue Moon Strategies ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 03 / 2026	
Mailing Address 7272 Wisconsin Ave 9th Floor			Amount 408.28	
City Bethesda	State MD	Zip Code 20814	Transaction ID : IE-35975-E Date of Disbursement or Obligation MM / DD / YYYY 05 / 28 / 2026	
Purpose of Expenditure SMS Texting - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: MCADAMS, BEN, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 01 State: UT	
Calendar Year-To-Date Per Election for Office Sought			21505.25 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Blue Moon Strategies ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 28 / 2026	
Mailing Address 7272 Wisconsin Ave 9th Floor			Amount 408.28	
City Bethesda	State MD	Zip Code 20814	Transaction ID : IE-35976-E Date of Disbursement or Obligation MM / DD / YYYY 05 / 28 / 2026	
Purpose of Expenditure SMS Texting - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: MCADAMS, BEN, , ,			☒ Support ☐ Oppose Office Sought: ☒ House ☐ President ☐ Senate District: 01 State: UT	
Calendar Year-To-Date Per Election for Office Sought			21505.25 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 816.56 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Lance, Ryan, , ,			Date MM / DD / YYYY 06 / 11 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 43 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC		FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Blue Moon Strategies ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 06 / 09 / 2026	
Mailing Address 7272 Wisconsin Ave 9th Floor		Amount 408.28	
City Bethesda	State MD	Zip Code 20814	Transaction ID : IE-36061-E Date of Disbursement or Obligation MM / DD / YYYY 05 / 28 / 2026
Purpose of Expenditure SMS Texting - Non-Contribution Account		Category/ Type	
Name of Federal Candidate: MCADAMS, BEN, , , ☒ Support ☐ Oppose		Office Sought: ☒ House ☐ President ☐ Senate District: 01 State: UT	
Calendar Year-To-Date Per Election for Office Sought 21505.25		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Blueprint Public Affairs ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 24 / 2026	
Mailing Address 968 N Terrace Hills Dr		Amount 477.28	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-32745-E Date of Disbursement or Obligation MM / DD / YYYY 05 / 08 / 2026
Purpose of Expenditure Email and SMS Production - Non-Contribution Account		Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , , ☒ Support ☐ Oppose		Office Sought: ☐ House ☒ Senate District: 00 State: KS	
Calendar Year-To-Date Per Election for Office Sought 13124.17		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		885.56	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Lance, Ryan, , ,		Date MM / DD / YYYY 06 / 11 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 44 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Blueprint Public Affairs ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 26 / 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 477.28	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-32746-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2026	
Purpose of Expenditure Email and SMS Production - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,			☒ Support Office Sought: ☐ House District: 00 ☐ Oppose ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought 13124.17			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Blueprint Public Affairs ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 24 / 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 186.00	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-32777-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2026	
Purpose of Expenditure Email Services - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,			☒ Support Office Sought: ☐ House District: 00 ☐ Oppose ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought 13124.17			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			663.28	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Lance, Ryan, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 45 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M M D D D Y Y Y Y Y Y				
Full Name of Payee Blueprint Public Affairs ☐ Memo Item			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 04 01 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 477.28	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-34984-E Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 05 08 2026	
Purpose of Expenditure Email and SMS Production - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ Senate District: 00 State: KS	
Calendar Year-To-Date Per Election for Office Sought 13124.17			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Blueprint Public Affairs ☐ Memo Item			Date of Public Distribution/Dissemination M M M D D D Y Y Y Y Y Y 04 02 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 477.28	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-34985-E Date of Disbursement or Obligation M M M D D D Y Y Y Y Y Y 05 08 2026	
Purpose of Expenditure Email and SMS Production - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ Senate District: 00 State: KS	
Calendar Year-To-Date Per Election for Office Sought 13124.17			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 954.56 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Lance, Ryan, , ,</u>			Date M M M D D D Y Y Y Y Y Y 06 11 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 46 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC		FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Blueprint Public Affairs ☐ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 07 / 2026	
Mailing Address 968 N Terrace Hills Dr		Amount 2000.00	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-34986-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2026
Purpose of Expenditure List Acquisition - Non-Contribution Account		Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,		☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: 00 State: KS	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
13124.17		2026	
Full Name of Payee Blueprint Public Affairs ☐ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 08 / 2026	
Mailing Address 968 N Terrace Hills Dr		Amount 238.64	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-34987-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2026
Purpose of Expenditure Email Production - Non-Contribution Account		Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,		☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: 00 State: KS	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
13124.17		2026	
(a) SUBTOTAL of Itemized Independent Expenditures		2238.64	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Lance, Ryan, , ,		Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 47 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Blueprint Public Affairs ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 14 / 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 2000.00	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-34988-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2026	
Purpose of Expenditure SMS Texting - Non-Contribution Account		Category/ Type		
Name of Federal Candidate: TAYLOR, NOAH, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought		13124.17	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Blueprint Public Affairs ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 16 / 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 900.00	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-34989-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2026	
Purpose of Expenditure List Acquisition - Non-Contribution Account		Category/ Type		
Name of Federal Candidate: TAYLOR, NOAH, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought		13124.17	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			2900.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Lance, Ryan, , ,		Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026		

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 48 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC	FEC IDENTIFICATION NUMBER ▼ C C00824342																								
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>M</td><td>M</td><td>M</td></tr><tr><td></td><td></td><td></td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>D</td><td>D</td><td>D</td></tr><tr><td></td><td></td><td></td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>		M	M	M				D	D	D				Y	Y	Y	Y	Y	Y						
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Y	Y	Y	Y	Y	Y																				

Full Name of Payee Blueprint Public Affairs ☐ Memo Item	Date of Public Distribution/Dissemination <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>M</td><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td><td></td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>D</td><td>D</td><td>D</td></tr><tr><td></td><td>1</td><td>6</td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td>2</td><td>0</td></tr></table>	M	M	M	0	4		D	D	D		1	6	Y	Y	Y	Y	Y	Y					2	0
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Mailing Address 968 N Terrace Hills Dr																									
City Salt Lake City	State UT	Zip Code 84103-4005																							
Purpose of Expenditure SMS Production - Non-Contribution Account		Category/Type <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																							
Name of Federal Candidate: TAYLOR, NOAH, , , ☒ Support ☐ Oppose		Office Sought: ☐ House ☒ Senate ☐ President ☐ Other (specify) ▶ District: 00 State: KS																							
Calendar Year-To-Date Per Election for Office Sought <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 13124.17														Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ 2026											

Full Name of Payee Blueprint Public Affairs ☐ Memo Item	Date of Public Distribution/Dissemination <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>M</td><td>M</td><td>M</td></tr><tr><td>0</td><td>4</td><td></td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>D</td><td>D</td><td>D</td></tr><tr><td></td><td>1</td><td>7</td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td>2</td><td>0</td></tr></table>	M	M	M	0	4		D	D	D		1	7	Y	Y	Y	Y	Y	Y					2	0
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0	4																								
D	D	D																							
	1	7																							
Y	Y	Y	Y	Y	Y																				
				2	0																				
Mailing Address 968 N Terrace Hills Dr																									
City Salt Lake City	State UT	Zip Code 84103-4005																							
Purpose of Expenditure SMS Production - Non-Contribution Account		Category/Type <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																							
Name of Federal Candidate: TAYLOR, NOAH, , , ☒ Support ☐ Oppose		Office Sought: ☐ House ☒ Senate ☐ President ☐ Other (specify) ▶ District: 00 State: KS																							
Calendar Year-To-Date Per Election for Office Sought <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 13124.17														Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶ 2026											

(a) SUBTOTAL of Itemized Independent Expenditures	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> 477.28												
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>												
(c) TOTAL Independent Expenditures	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>												

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lance, Ryan, , ,
Signature

Date

M	M	M
0	6	

 /

D	D	D
	1	1

 /

Y	Y	Y	Y	Y	Y
				2	0

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 49 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Blueprint Public Affairs ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 24 / 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 238.64	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-34992-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2026	
Purpose of Expenditure SMS Production - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: 00 State: KS ☐ President	
Calendar Year-To-Date Per Election for Office Sought 13124.17			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Blueprint Public Affairs ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 27 / 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 238.64	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-34993-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2026	
Purpose of Expenditure Email Production - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: 00 State: KS ☐ President	
Calendar Year-To-Date Per Election for Office Sought 13124.17			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 477.28 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Lance, Ryan, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 50 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Blueprint Public Affairs ☒ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 05 / 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 238.64	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-37078-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure Email Production - Non-Contribution Account		Category/ Type		
Name of Federal Candidate: TAYLOR, NOAH, , , ☒ Support ☐ Oppose			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought 13124.17			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Blueprint Public Affairs ☒ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 05 / 2026	
Mailing Address 968 N Terrace Hills Dr			Amount 954.56	
City Salt Lake City	State UT	Zip Code 84103-4005	Transaction ID : IE-37079-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure SMS Production - Non-Contribution Account		Category/ Type		
Name of Federal Candidate: TAYLOR, NOAH, , , ☒ Support ☐ Oppose			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought 13124.17			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Lance, Ryan, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 51 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC		FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report		New report Amends report filed on MM / DD / YYYY	
Full Name of Payee Civitech ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 29 / 2026	
Mailing Address 2105 E MLK JR BLVD Suite 359		Amount 15107.00	
City AUSTIN	State TX	Zip Code 78702-1341	Transaction ID : IE-35977-E Date of Disbursement or Obligation MM / DD / YYYY 06 / 02 / 2026
Purpose of Expenditure Direct Mail Data, Production and Postage - Non-Contribution Account		Category/Type	
Name of Federal Candidate: MCADAMS, BEN, , ,		☒ Support ☐ Oppose Office Sought: ☒ House ☐ Senate District: 01 State: UT	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee Mailchimp ☐ Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 27 / 2026	
Mailing Address 405 N Angier Ave NE		Amount 262.50	
City Atlanta	State GA	Zip Code 30308-3139	Transaction ID : IE-34994-E Date of Disbursement or Obligation MM / DD / YYYY 04 / 27 / 2026
Purpose of Expenditure Email Services - Non-Contribution Account		Category/Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,		☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: 00 State: KS	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		15369.50	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <u>Lance, Ryan, , ,</u>		Date MM / DD / YYYY 06 / 11 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 52 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Scale to Win ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 24 / 2026	
Mailing Address 455 MARKET ST STE 1940			Amount 52.33	
City SAN FRANCISCO	State CA	Zip Code 94105-2448	Transaction ID : IE-32743-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 02 / 2026	
Purpose of Expenditure SMS Texting - Non-Contribution Account		Category/ Type		
Name of Federal Candidate: TAYLOR, NOAH, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought		13124.17	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Scale to Win ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 26 / 2026	
Mailing Address 455 MARKET ST STE 1940			Amount 46.44	
City SAN FRANCISCO	State CA	Zip Code 94105-2448	Transaction ID : IE-32744-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 02 / 2026	
Purpose of Expenditure SMS Texting - Non-Contribution Account		Category/ Type		
Name of Federal Candidate: TAYLOR, NOAH, , ,		☒ Support ☐ Oppose	Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought		13124.17	Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			98.77	
(b) SUBTOTAL of Unitemized Independent Expenditures.....				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Lance, Ryan, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 53 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Scale to Win ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 01 / 2026	
Mailing Address 455 MARKET ST STE 1940			Amount 44.00	
City SAN FRANCISCO	State CA	Zip Code 94105-2448	Transaction ID : IE-34979-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 06 / 2026	
Purpose of Expenditure SMS Texting - Non-Contribution Account		Category/ Type	Name of Federal Candidate: TAYLOR, NOAH, , , ☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: 00 State: KS ☐ President	
Calendar Year-To-Date Per Election for Office Sought 13124.17		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
Full Name of Payee Scale to Win ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 02 / 2026	
Mailing Address 455 MARKET ST STE 1940			Amount 42.39	
City SAN FRANCISCO	State CA	Zip Code 94105-2448	Transaction ID : IE-34980-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 06 / 2026	
Purpose of Expenditure SMS Texting - Non-Contribution Account		Category/ Type	Name of Federal Candidate: TAYLOR, NOAH, , , ☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate District: 00 State: KS ☐ President	
Calendar Year-To-Date Per Election for Office Sought 13124.17		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures ▶ 86.39				
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶				
(c) TOTAL Independent Expenditures ▶				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Lance, Ryan, , ,</u>			Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 54 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Scale to Win 			☐ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 16 / 2026	
Mailing Address 455 MARKET ST STE 1940			Amount 1047.22	
City SAN FRANCISCO		State CA	Zip Code 94105-2448	
Purpose of Expenditure SMS Texting - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: 00 State: KS	
Calendar Year-To-Date Per Election for Office Sought			13124.17 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Scale to Win 			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 17 / 2026	
Mailing Address 455 MARKET ST STE 1940			Amount 979.19	
City SAN FRANCISCO		State CA	Zip Code 94105-2448	
Purpose of Expenditure SMS Texting - Non-Contribution Account			Category/ Type	
Name of Federal Candidate: TAYLOR, NOAH, , ,			☒ Support ☐ Oppose Office Sought: ☐ House ☒ Senate ☐ President ☐ General District: 00 State: KS	
Calendar Year-To-Date Per Election for Office Sought			13124.17 Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 2026.41 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Lance, Ryan, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 55 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC		FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report		New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Scale to Win ☐ Memo Item Mailing Address 455 MARKET ST STE 1940 City SAN FRANCISCO State CA Zip Code 94105-2448 Purpose of Expenditure SMS Texting - Non-Contribution Account Category/Type		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Amount 1045.48 Transaction ID : IE-34983-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: TAYLOR, NOAH, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought 13124.17		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Scale to Win ☐ Memo Item Mailing Address 455 MARKET ST STE 1940 City SAN FRANCISCO State CA Zip Code 94105-2448 Purpose of Expenditure SMS Texting - Non-Contribution Account Category/Type		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Amount 223.10 Transaction ID : IE-37058-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate: TAYLOR, NOAH, , , ☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought 13124.17		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		1268.58	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature Lance, Ryan, , ,		Date M M / D D / Y Y Y Y Y Y	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 56 OF 56
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Way Back PAC			FEC IDENTIFICATION NUMBER ▼ C C00824342	
Check if ☐ 24-hour report ☐ 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee Scale to Win		☒ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 455 MARKET ST STE 1940			Amount 283.08	
City SAN FRANCISCO	State CA	Zip Code 94105-2448	Transaction ID : IE-37059-E Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure SMS Texting - Non-Contribution Account		Category/ Type		
Name of Federal Candidate: MCADAMS, BEN, , ,		☒ Support ☐ Oppose	Office Sought: ☒ House District: 01 ☐ President ☐ Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought 21505.25			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee		☐ Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount 	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Purpose of Expenditure		Category/ Type		
Name of Federal Candidate:		☐ Support ☐ Oppose	Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 0.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures 33561.42				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Lance, Ryan, , ,			Date M M / D D / Y Y Y Y Y Y 06 / 11 / 2026	