

**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

THE PROGRESS FUND

ADDRESS (number and street)

2418 E 5TH AVE

Check if different
than previously
reported. (ACC)

KNOXVILLE

TN

37917

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00952093

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

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

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

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

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M /

D D /

Y Y Y Y Y Y

through

M M /

D D /

Y Y Y Y Y Y

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

Type or Print Name of Treasurer

Lawson, Phillip, , ,

Signature of Treasurer

Lawson, Phillip, , ,

Date

M M /

D D /

Y Y Y Y Y Y

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

THE PROGRESS FUND

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2026 To: MM / DD / YYYY 07 / 31 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYY YYYY		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	50000.00	
(c) Total Receipts (from Line 19)	50000.10	100000.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	100000.10	100000.10
7. Total Disbursements (from Line 31)	71414.00	71414.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28586.10	28586.10
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

THE PROGRESS FUND

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2026

To:

M M / D D / Y Y Y Y
07 31 2026

I. Receipts

COLUMN A
Total This PeriodCOLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

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

0.00

10000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

10000.00

(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)

0.00

10000.00

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.).....

50000.10

90000.10

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))

50000.10

100000.10

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

50000.10

100000.10

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	9000.00
24. Independent Expenditures (use Schedule E)	52414.00	52414.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	10000.00	10000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	71414.00	71414.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71414.00	71414.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	0.00	10000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	10000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 11
(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)

THE PROGRESS FUND

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

A. Lawson, Phillip, , ,

Mailing Address 2418 E 5th Avenue

City
Knoxville

State
TN

Zip Code
37917

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LHP Capital

Occupation (for Individual)
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 16 / 2026

Transaction ID : SA17.4129

Amount of Each Receipt this Period

50000.00

☐ Memo Item

Non Federal Contribution

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)..... ►

50000.00

50000.00

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

PAGE 7 OF 11

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

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NAME OF COMMITTEE (In Full)

THE PROGRESS FUND

Full Name (Last, First, Middle Initial)

A. MOLDER FOR CONGRESS

Mailing Address PO BOX 1468

City
COLUMBIAState
TNZip Code
38402

Purpose of Disbursement

Contribution

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2026

FEC Identification Number

C C00918581**Transaction ID : SB23.4122**

Amount of Each Disbursement this Period

4500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VINCENT DIXIE FOR TENNESSEE

Mailing Address 4020 DRAKES BRANCH RD

City
NASHVILLEState
TNZip Code
37218

Purpose of Disbursement

Contribution

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2026

FEC Identification Number

C C00911370**Transaction ID : SB23.4124**

Amount of Each Disbursement this Period

4500.00

☐ 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).....▶

9000.00

9000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

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

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NAME OF COMMITTEE (In Full)

THE PROGRESS FUND

Full Name (Last, First, Middle Initial)

A. Remus, Hendrell, , ,

Mailing Address 1490 Faxon Ave

City
Memphis

State
TN

Zip Code
38104

Purpose of Disbursement
Consulting/Political Strategy
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For: 2026
☐ Primary ☐ General
☒ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 02 / 2026

FEC Identification Number

C

Transaction ID : SB29.4130

Amount of Each Disbursement this Period

10000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

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)..... ►

10000.00

10000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 9 OF 11
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE PROGRESS FUND			FEC IDENTIFICATION NUMBER ▼ C C00952093	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee Strategy Factory ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 88 Union Avenue Suite 410			Amount 14382.00	
City Memphis	State TN	Zip Code 38103	Transaction ID : SE.4107 Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure Direct Mail		Category/ Type		
Name of Federal Candidate: MOLDER, CHAZ, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: TN	
Calendar Year-To-Date Per Election for Office Sought 14382.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Strategy Factory ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 88 Union Avenue Suite 410			Amount 14382.00	
City Memphis	State TN	Zip Code 38103	Transaction ID : SE.4110 Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure Direct Mail		Category/ Type		
Name of Federal Candidate: DIXIE, VINCENT, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: TN	
Calendar Year-To-Date Per Election for Office Sought 14382.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 28764.00 (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.				
_____ Lawson, Phillip, , , Signature			Date MM / DD / YYYY	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 10 OF 11
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE PROGRESS FUND			FEC IDENTIFICATION NUMBER ▼ C C00952093	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY				
Full Name of Payee Strategy Factory ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 88 Union Avenue Suite 410			Amount 4325.00	
City Memphis	State TN	Zip Code 38103	Transaction ID : SE.4112 Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure Texting		Category/ Type		
Name of Federal Candidate: DIXIE, VINCENT, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 07 ☐ President ☐ Senate State: TN	
Calendar Year-To-Date Per Election for Office Sought 18707.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee Strategy Factory ☐ Memo Item			Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 88 Union Avenue Suite 410			Amount 4325.00	
City Memphis	State TN	Zip Code 38103	Transaction ID : SE.4113 Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure Texting		Category/ Type		
Name of Federal Candidate: MOLDER, CHAZ, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 05 ☐ President ☐ Senate State: TN	
Calendar Year-To-Date Per Election for Office Sought 18707.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			8650.00	
(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.				
_____ Lawson, Phillip, , , Signature			Date MM / DD / YYYY	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 11 OF 11
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) THE PROGRESS FUND			FEC IDENTIFICATION NUMBER ▼ C C00952093	
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 Strategy Factory			☐ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 30 / 2026	
Mailing Address 88 Union Avenue Suite 410			Amount 15000.00	
City Memphis	State TN	Zip Code 38103	Transaction ID : SE.4119 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 30 / 2026	
Purpose of Expenditure Digital Advertising and Production			Category/ Type 004	
Name of Federal Candidate: MOLDER, CHAZ, , ,			☒ Support Office Sought: ☒ House District: 05 ☐ Oppose ☐ President ☐ Senate State: TN	
Calendar Year-To-Date Per Election for Office Sought 33707.00			Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee			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 Office Sought: ☐ House District: _____ ☐ Oppose ☐ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 15000.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures 52414.00				
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.				
Lawson, Phillip, , , Signature			Date M M / D D / Y Y Y Y Y Y 08 / 20 / 2026	