

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Kat for Congress

ADDRESS (number and street)

5200 NW 43rd St

Ste 102-180

Gainesville

FL

32606

☐ Check if different
than previously
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00730895

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

03

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

04

D D /

01

Y Y Y Y /

2025

through

M M /

06

D D /

30

Y Y Y Y /

2025

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 Kilgore, Paul, , ,

Signature of Treasurer

Kilgore, Paul, , ,

Date

M M /

07

D D /

15

Y Y Y Y /

2025

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 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Kat for Congress

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	267223.02	576633.26
(b) Total Contribution Refunds (from Line 20(d))	250.00	600.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	266973.02	576033.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	278442.72	881619.77
(b) Total Offsets to Operating Expenditures (from Line 14)	126.91	376.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	278315.81	881242.86
8. Cash on Hand at Close of Reporting Period (from Line 27)	629717.87	
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	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Kat for Congress

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

82618.42

143313.28

(ii) Unitemized

51104.60

143819.98

(iii) TOTAL of contributions
from individuals ▶

133723.02

287133.26

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

133500.00

289500.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

267223.02

576633.26

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

33822.54

172259.48

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

126.91

376.91

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

301172.47

749269.65

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	278442.72	881619.77
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	18430.75	18430.75
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	250.00	600.00
(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 20(a), (b), and (c)).....	250.00	600.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	297123.47	900650.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	625668.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	301172.47
25. SUBTOTAL (add Line 23 and Line 24).....	926841.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	297123.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	629717.87

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

PAGE 5 OF 189

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)

Kat for Congress

Full Name (Last, First, Middle Initial)

ANDERSON, DUANE, E., MRS,

Mailing Address 967 RIVERSTONE LN

City
SPRINGFIELDState
ORZip Code
97477-3159FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 30 2025

Transaction ID : SA11A.63814

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANDERSON, DUANE, E., MRS,

Mailing Address 967 RIVERSTONE LN

City
SPRINGFIELDState
ORZip Code
97477-3159FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 02 2025

Transaction ID : SA11A.64864

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANDERSON, DUANE, E., MRS,

Mailing Address 967 RIVERSTONE LN

City
SPRINGFIELDState
ORZip Code
97477-3159FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 03 2025

Transaction ID : SA11A.65547

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

200.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

ARTMAN, MARVIN, W., MR,

Mailing Address 6845 SW COUNTY ROAD 225

City
STARKEState
FLZip Code
32091-6621FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 16 2025

Transaction ID : SA11A.65567

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, G., MR,

Mailing Address PO BOX 207

City
CHINAState
TXZip Code
77613-0207FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 07 2025

Transaction ID : SA11A.63969

Amount of Each Receipt this Period

350.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, G., MR,

Mailing Address PO BOX 207

City
CHINAState
TXZip Code
77613-0207FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 01 2025

Transaction ID : SA11A.64867

Amount of Each Receipt this Period

350.00

☐ Memo Item
CONTRIBUTION

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

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

800.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

BIEBER, ALBERT, G., MR,

A.

Mailing Address PO BOX 207

City

CHINA

State

TX

Zip Code

77613-0207

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2025D D / Y Y Y Y Y
06 / 2025Y Y Y Y Y
2025

Transaction ID : SA11A.65551

Amount of Each Receipt this Period

350.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

BIELLING, KATHY, B., MRS.,

B.

Mailing Address 6074 W STATE ROAD 238

City

LAKE BUTLER

State

FL

Zip Code

32054-7997

FEC ID number of contributing
federal political committee.

C

Name of Employer

LAND AND HOMES

Occupation

REAL ESTATE SALES

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2025D D / Y Y Y Y Y
20 / 2025Y Y Y Y Y
2025

Transaction ID : SA11A.65145

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

BOSWORTH, JAMES, M., MR,

C.

Mailing Address 2139 NW 28TH PL

City

GAINESVILLE

State

FL

Zip Code

32605-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 14 / 2025D D / Y Y Y Y Y
14 / 2025Y Y Y Y Y
2025

Transaction ID : SA11A.64053

Amount of Each Receipt this Period

107.00

☐ Memo Item
CONTRIBUTION

957.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 189

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

BOSWORTH, JAMES, M., MR,

Mailing Address 2139 NW 28TH PL

City

GAINESVILLE

State

FL

Zip Code

32605-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 18 2025

Transaction ID : SA11A.64054

Amount of Each Receipt this Period

125.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

BOSWORTH, JAMES, M., MR,

Mailing Address 2139 NW 28TH PL

City

GAINESVILLE

State

FL

Zip Code

32605-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

432.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 12 2025

Transaction ID : SA11A.64898

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

BROOKHART, PATRICIA, F., MRS,

Mailing Address 514 LIMERICK CIR UNIT 301
UNIT 301

City

TIMONIUM

State

MD

Zip Code

21093-8187

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 02 2025

Transaction ID : SA11A.63736

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

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

525.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)

Kat for Congress

A. Full Name (Last, First, Middle Initial) BROOKHART, PATRICIA, F., MRS. Mailing Address 514 LIMERICK CIR UNIT 301 UNIT 301 City TIMONIUM State MD Zip Code 21093-8187 FEC ID number of contributing federal political committee. C Name of Employer NONE Occupation RETIRED Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 800.00			Date of Receipt M M / D D / Y Y Y Y Y 05 30 2025 Transaction ID : SA11A.64906 Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Memo Item CONTRIBUTION	
B. Full Name (Last, First, Middle Initial) BROUGHTON, BEN, , MR., Mailing Address 2823 COUNTY ROAD 249 City LIVE OAK State FL Zip Code 32060-8152 FEC ID number of contributing federal political committee. C Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 06 30 2025 Transaction ID : SA11A.65828 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item CONTRIBUTION	
C. Full Name (Last, First, Middle Initial) BURKE, THOMAS, F., MR, SR Mailing Address 4424 SE 8TH ST City OCALA State FL Zip Code 34471-3258 FEC ID number of contributing federal political committee. C Name of Employer NONE Occupation RETIRED Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 04 11 2025 Transaction ID : SA11A.63632 Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Memo Item CONTRIBUTION	
SUBTOTAL of Receipts This Page (optional)..... ▶			850.00	
TOTAL This Period (last page this line number only)..... ▶				

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

BURKE, THOMAS, F., MR, SR

Mailing Address 4424 SE 8TH ST

City
OCALAState
FLZip Code
34471-3258FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 15 2025

Transaction ID : SA11A.64881

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

BURKE, THOMAS, F., MR, SR

Mailing Address 4424 SE 8TH ST

City
OCALAState
FLZip Code
34471-3258FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 09 2025

Transaction ID : SA11A.65572

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

CANDLER, CHRIS, , ,

Mailing Address 264 NORTHEAST HERNANDO AVENUE

City
LAKE CITYState
FLZip Code
32055-4012FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
BREWING COMPANY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2102.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 17 2025

Transaction ID : SA11A.65861

Amount of Each Receipt this Period

2102.00

☐ Memo Item
CONTRIBUTION
IN KIND: FACILITY RENTAL

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

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

2162.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

CLAIBORNE, WALTER, HERBERT, MR, III

Mailing Address 14217 CLAIBORNE RD

City

BATCHELOR

State

LA

Zip Code

70715-3514

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 08 / 2025

Transaction ID : SA11A.63674

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

CLAIBORNE, WALTER, HERBERT, MR, III

Mailing Address 14217 CLAIBORNE RD

City

BATCHELOR

State

LA

Zip Code

70715-3514

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2025

Transaction ID : SA11A.63675

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

CLAIBORNE, WALTER, HERBERT, MR, III

Mailing Address 14217 CLAIBORNE RD

City

BATCHELOR

State

LA

Zip Code

70715-3514

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 09 / 2025

Transaction ID : SA11A.65530

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

COLLINGS, SUSAN, K., MRS,

Mailing Address 17803 SE 59TH ST

City

MICANOPY

State

FL

Zip Code

32667-3889

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.64811

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

COLLINGS, SUSAN, K., MRS,

Mailing Address 17803 SE 59TH ST

City

MICANOPY

State

FL

Zip Code

32667-3889

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.65430

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

COOK, MARK, R., MR,

Mailing Address 2631 BRODNAX RD

City

BRODNAX

State

VA

Zip Code

23920-2821

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

Transaction ID : SA11A.63745

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

150.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 189

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

COOK, MARK, R., MR,

A.

Mailing Address 2631 BRODNAX RD

City

BRODNAX

State

VA

Zip Code

23920-2821

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 12 2025

Transaction ID : SA11A.64874

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

COOK, MARK, R., MR,

B.

Mailing Address 2631 BRODNAX RD

City

BRODNAX

State

VA

Zip Code

23920-2821

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 29 2025

Transaction ID : SA11A.64875

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

CRAWFORD, CHARLES, R., MR,

C.

Mailing Address 18618 NW STATE ROAD 16

City

STARKE

State

FL

Zip Code

32091-8156

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65602

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

200.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 189

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

CULBERTSON, JOHN, H., MR,

A.

Mailing Address 160 N LA CANADA DR

City

GREEN VALLEY

State

AZ

Zip Code

85614-3129

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 24 2025

Transaction ID : SA11A.64003

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DECESARE, CATHERINE, , MRS,

B.

Mailing Address 59 LINDEN ST

City

MASSAPEQUA

State

NY

Zip Code

11758-5125

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

663.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 07 2025

Transaction ID : SA11A.64091

Amount of Each Receipt this Period

102.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DECESARE, CATHERINE, , MRS,

C.

Mailing Address 59 LINDEN ST

City

MASSAPEQUA

State

NY

Zip Code

11758-5125

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

663.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 28 2025

Transaction ID : SA11A.64092

Amount of Each Receipt this Period

102.00

☐ Memo Item
CONTRIBUTION

454.00

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

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

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

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

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(check only one)

PAGE 15 OF 189

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)
DECESARE, CATHERINE, , MRS,

Mailing Address 59 LINDEN ST

City
MASSAPEQUA

State
NY

Zip Code
11758-5125

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

663.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 29 2025

Transaction ID : SA11A.64952

Amount of Each Receipt this Period

102.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
DECESARE, CATHERINE, , MRS,

Mailing Address 59 LINDEN ST

City
MASSAPEQUA

State
NY

Zip Code
11758-5125

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

663.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : SA11A.65784

Amount of Each Receipt this Period

153.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
DIMARE, ANTHONY, J., MR.,

Mailing Address 7984 ROYAL BIRKDALE CIR

City
LAKEWOOD RANCH

State
FL

Zip Code
34202-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer
DIMARE HOMESTEAD, INC.

Occupation
AGRICULTURE PRODUCER EXECUTIVE OV

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65826

Amount of Each Receipt this Period

3500.00

☐ Memo Item
CONTRIBUTION

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

3755.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

DIMARE, DEBRA, , MRS.,

A.

Mailing Address 7994 ROYAL BIRKDALE CIR

City

LAKEWOOD RANCH

State

FL

Zip Code

34202-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : SA11A.65827

Amount of Each Receipt this Period

1500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DOUGLASS, DONALD, J., MR,

B.

Mailing Address 8961 LAKE DR APT 306

City

CAPE CANAVERAL

State

FL

Zip Code

32920-5507

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

Transaction ID : SA11A.63806

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DOUGLASS, DONALD, J., MR,

C.

Mailing Address 8961 LAKE DR APT 306

City

CAPE CANAVERAL

State

FL

Zip Code

32920-5507

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

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

Transaction ID : SA11A.63807

Amount of Each Receipt this Period

50.00

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

1600.00

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

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

PAGE 17 OF 189

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

DOUGLASS, DONALD, J., MR,

Mailing Address 8961 LAKE DR APT 306

City

CAPE CANAVERAL

State

FL

Zip Code

32920-5507

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 03 2025

Transaction ID : SA11A.65757

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DOUGLASS, DONALD, J., MR,

Mailing Address 8961 LAKE DR APT 306

City

CAPE CANAVERAL

State

FL

Zip Code

32920-5507

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 26 2025

Transaction ID : SA11A.65758

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DUBACHER, JOSEPH, R., MR,

Mailing Address 1201 W STEWART

City

PUYALLUP

State

WA

Zip Code

98371-5155

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 03 2025

Transaction ID : SA11A.63711

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

200.00

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

PAGE 18 OF 189

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

DUBACHER, JOSEPH, R., MR,

A. Mailing Address 1201 W STEWART

City
PUYALLUPState
WAZip Code
98371-5155FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 02 2025

Transaction ID : SA11A.65340

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DUDDER, DENNIS, L., MR,

B. Mailing Address 5811 CADY RD

City
EVERETTState
WAZip Code
98203-3728FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 03 2025

Transaction ID : SA11A.65761

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DUFRESNE, DEREK, , ,

C. Mailing Address 3627 10TH ST NW

City
WASHINGTONState
DCZip Code
20010-1403FEC ID number of contributing
federal political committee.

C

Name of Employer
RIGHT VOTER LLCOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 12 2025

Transaction ID : SA11A.65860

Amount of Each Receipt this Period

2100.00

☐ Memo Item
CONTRIBUTION
IN-KIND: LIST RENTAL

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

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

2350.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 189

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

DULINSKY, FRANK, B., MR,

Mailing Address 4350 BANKS RD

City

MIDDLEBURG

State

FL

Zip Code

32068-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 03 2025

Transaction ID : SA11A.64107

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

DULINSKY, FRANK, B., MR,

Mailing Address 4350 BANKS RD

City

MIDDLEBURG

State

FL

Zip Code

32068-5004

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 02 2025

Transaction ID : SA11A.65615

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

FLUSCHE, PATTY, , MS,

Mailing Address 5801 S 104TH ST W

City

MUSKOGEE

State

OK

Zip Code

74401-3204

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 08 2025

Transaction ID : SA11A.64159

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

200.00

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

PAGE 20 OF 189

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

FLUSCHE, PATTY, , MS,

A. Mailing Address 5801 S 104TH ST W

City
MUSKOGEEState
OKZip Code
74401-3204FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

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

Transaction ID : SA11A.64160

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTIONB. Full Name (Last, First, Middle Initial)
FLUSCHE, PATTY, , MS,
Mailing Address 5801 S 104TH ST WCity
MUSKOGEEState
OKZip Code
74401-3204FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

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

Transaction ID : SA11A.65710

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTIONC. Full Name (Last, First, Middle Initial)
FLUSCHE, PATTY, , MS,
Mailing Address 5801 S 104TH ST WCity
MUSKOGEEState
OKZip Code
74401-3204FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

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

Transaction ID : SA11A.65711

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

175.00

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

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

GILLEY, JAMES, L., MR,

A.

Mailing Address 6610 KILMARNOCH DR

City

CATONSVILLE

State

MD

Zip Code

21228-3410

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 02 2025

Transaction ID : SA11A.63755

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

GILLEY, JAMES, L., MR,

B.

Mailing Address 6610 KILMARNOCH DR

City

CATONSVILLE

State

MD

Zip Code

21228-3410

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 22 2025

Transaction ID : SA11A.63756

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

GILLEY, JAMES, L., MR,

C.

Mailing Address 6610 KILMARNOCH DR

City

CATONSVILLE

State

MD

Zip Code

21228-3410

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 18 2025

Transaction ID : SA11A.65752

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

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

122.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

GILLEY, JAMES, L., MR,

A. Mailing Address 6610 KILMARNOCH DR

City

CATONSVILLE

State

MD

Zip Code

21228-3410

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

244.00

Date of Receipt

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

Transaction ID : SA11A.65753

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION**B.**

Full Name (Last, First, Middle Initial)

HALE, JACQUELINE, D., COL.,

Mailing Address 28229 COUNTY ROAD 33 LOT W228
LOT W228

City

LEESBURG

State

FL

Zip Code

34748-4589

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

470.00

Date of Receipt

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

Transaction ID : SA11A.63833

Amount of Each Receipt this Period

235.00

☐ Memo Item
CONTRIBUTION**C.**

Full Name (Last, First, Middle Initial)

HALE, JACQUELINE, D., COL.,

Mailing Address 28229 COUNTY ROAD 33 LOT W228
LOT W228

City

LEESBURG

State

FL

Zip Code

34748-4589

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

470.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	5	

Transaction ID : SA11A.65734

Amount of Each Receipt this Period

235.00

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

522.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

HILL, ELLEN, M., MRS,

Mailing Address 3154 NAUTILUS RD

City

MIDDLEBURG

State

FL

Zip Code

32068-6607

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

Transaction ID : SA11A.63531

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

HILL, ELLEN, M., MRS,

Mailing Address 3154 NAUTILUS RD

City

MIDDLEBURG

State

FL

Zip Code

32068-6607

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11A.63532

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

HILL, ELLEN, M., MRS,

Mailing Address 3154 NAUTILUS RD

City

MIDDLEBURG

State

FL

Zip Code

32068-6607

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11A.65623

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

300.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

HINES, ALTON, L., MR.,

A. Mailing Address 1487 SW KING ST

City
LAKE CITYState
FLZip Code
32024-3335FEC ID number of contributing
federal political committee.

C

Name of Employer
BEN E. KEITH CO.Occupation
SALES

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2025

Transaction ID : SA11A.65147

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

HOPKINS, MARK, T., MR,

B. Mailing Address 3043 S ROBERTSON RD

City
CASPERState
WYZip Code
82604-3621FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2025

Transaction ID : SA11A.65751

Amount of Each Receipt this Period

135.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C., MR,

C. Mailing Address 15 SANDALWOOD DR

City
PARSIPPANYState
NJZip Code
07054-1621FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2025

Transaction ID : SA11A.63720

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

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

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

460.00

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

PAGE 25 OF 189

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

HUANG, JOSEPH, C., MR,

A. Mailing Address 15 SANDALWOOD DR

City

PARSIPPANY

State

NJ

Zip Code

07054-1621

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

337.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 05 2025

Transaction ID : SA11A.65577

Amount of Each Receipt this Period

75.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

HUGHES, MARION, T., MR,

B. Mailing Address 2232 WALLIS AVE

City

SAINT LOUIS

State

MO

Zip Code

63114-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 03 2025

Transaction ID : SA11A.63559

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

HUSKEY, GLENN, H., MR,

C. Mailing Address 10216 BOB GRAY RD

City

KNOXVILLE

State

TN

Zip Code

37932-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 30 2025

Transaction ID : SA11A.63971

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

275.00

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

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

PAGE 26 OF 189

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

JAMIESON, THOMAS, A., MR,

A. Mailing Address 10354 QUAIL CROWN DR

City
NAPLES

State
FL

Zip Code
34119-8832

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 07 2025

Transaction ID : SA11A.63587

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMIESON, THOMAS, A., MR,

B. Mailing Address 10354 QUAIL CROWN DR

City
NAPLES

State
FL

Zip Code
34119-8832

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 28 2025

Transaction ID : SA11A.63588

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAMIESON, THOMAS, A., MR,

C. Mailing Address 10354 QUAIL CROWN DR

City
NAPLES

State
FL

Zip Code
34119-8832

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 03 2025

Transaction ID : SA11A.65738

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

100.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

JAMIESON, THOMAS, A., MR,

Mailing Address 10354 QUAIL CROWN DR

City
NAPLESState
FLZip Code
34119-8832FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 26 2025

Transaction ID : SA11A.65739

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHNSON, JONI, M., ,

Mailing Address 9015 NW 9TH LN

City
GAINESVILLEState
FLZip Code
32606-7111FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 25 2025

Transaction ID : SA11A.64145

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHNSON, JONI, M., ,

Mailing Address 9015 NW 9TH LN

City
GAINESVILLEState
FLZip Code
32606-7111FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65314

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

225.00

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

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

JONES, CARLTON, A., MR.,

Mailing Address 1198 NW SCENIC LAKE DR.

City
LAKE CITYState
FLZip Code
32055-8594FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65144

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

KETCHAM, J., HUNTER, MR.,

Mailing Address 295 SE BAILEY ST

City
LAKE CITYState
FLZip Code
32024-5501FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
FARMER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65149

Amount of Each Receipt this Period

1500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

KETCHAM, J., HUNTER, MR.,

Mailing Address 295 SE BAILEY ST

City
LAKE CITYState
FLZip Code
32024-5501FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
FARMER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65150

Amount of Each Receipt this Period

3500.00

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

5250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

KETCHAM, LUCI, R., MRS.,

A. Mailing Address 295 SE BAILEY STCity
LAKE CITYState
FLZip Code
32024-5501FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
CATTLE RANCHER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65148

Amount of Each Receipt this Period

3500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

KETCHAM, LUCI, R., MRS.,

B. Mailing Address 295 SE BAILEY STCity
LAKE CITYState
FLZip Code
32024-5501FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
CATTLE RANCHER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65151

Amount of Each Receipt this Period

1500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

KOSCIOLEK, SYLVIA, M., MS,

C. Mailing Address 12228 WOODLINE DRCity
FENTONState
MIZip Code
48430-3514FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 02 2025

Transaction ID : SA11A.63576

Amount of Each Receipt this Period

150.00

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

5150.00

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

PAGE 30 OF 189

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)

Kat for Congress

Full Name (Last, First, Middle Initial)

KUKK, PETER, , MR,

A. Mailing Address 1 VINCENT RD APT 4A
APT 4ACity
BRONXVILLEState
NYZip Code
10708-6523FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

472.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		28		2025

Transaction ID : SA11A.63546

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

LEONICK, MARINA, A., MS,

B. Mailing Address 954 LORIMER ST
APT 3City
BROOKLYNState
NYZip Code
11222-3104FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

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

Transaction ID : SA11A.63838

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

LEONICK, MARINA, A., MS,

C. Mailing Address 954 LORIMER ST
APT 3City
BROOKLYNState
NYZip Code
11222-3104FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		23		2025

Transaction ID : SA11A.63839

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

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

220.00

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

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

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

FOR LINE NUMBER:
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

LEONICK, MARINA, A., MS,

A.

Mailing Address 954 LORIMER ST

APT 3

City

BROOKLYN

State

NY

Zip Code

11222-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 09 2025

Transaction ID : SA11A.65467

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

LEONICK, MARINA, A., MS,

B.

Mailing Address 954 LORIMER ST

APT 3

City

BROOKLYN

State

NY

Zip Code

11222-3104

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65468

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

LUND, JOAN, H., MRS,

C.

Mailing Address 1705 SPRING CREEK RD

City

BELVIDERE

State

IL

Zip Code

61008-9699

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : SA11A.63778

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

120.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

LYON, YVONNE, M., MRS,

Mailing Address 3025 LEPRECHAUN LN

City

PALM HARBOR

State

FL

Zip Code

34683-2321

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11A.64958

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MALTONI, GLORIA, A., MRS,

Mailing Address 734 PARK WAY

City

S SAN FRAN

State

CA

Zip Code

94080-2510

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

286.00

Date of Receipt

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

Transaction ID : SA11A.63952

Amount of Each Receipt this Period

78.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MALVESE, PAUL, G., MR,

Mailing Address 141 LEGENDARY CIR

City

PALM BEACH GARDENS

State

FL

Zip Code

33418-8470

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : SA11A.63920

Amount of Each Receipt this Period

225.00

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

553.00

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

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

MALVESE, PAUL, G., MR,

A. Mailing Address 141 LEGENDARY CIR

City

PALM BEACH GARDENS

State

FL

Zip Code

33418-8470

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : SA11A.65595

Amount of Each Receipt this Period

225.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MAPLE, RALPH, E., MR,

B. Mailing Address 5215 VALLEY BLUFF LN

City

KATY

State

TX

Zip Code

77494-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

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

Transaction ID : SA11A.64169

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MAPLE, RALPH, E., MR,

C. Mailing Address 5215 VALLEY BLUFF LN

City

KATY

State

TX

Zip Code

77494-2966

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

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

Transaction ID : SA11A.64947

Amount of Each Receipt this Period

250.00

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

775.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

MARTIN, ELLEN, W., MS,

A. Mailing Address 4955 GLENBROOK RD NW

City

WASHINGTON

State

DC

Zip Code

20016-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11A.65520

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MASSERY, HENRY, P., MR,

B. Mailing Address 6917 E COUNTY ROAD 225

City

GAINESVILLE

State

FL

Zip Code

32609-4319

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

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

Transaction ID : SA11A.63962

Amount of Each Receipt this Period

35.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MASSERY, HENRY, P., MR,

C. Mailing Address 6917 E COUNTY ROAD 225

City

GAINESVILLE

State

FL

Zip Code

32609-4319

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

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

Transaction ID : SA11A.64784

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

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

580.00

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

MASSERY, HENRY, P., MR,

A. Mailing Address 6917 E COUNTY ROAD 225

City
GAINESVILLE

State
FL

Zip Code
32609-4319

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 05 2025

Transaction ID : SA11A.65376

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MASSERY, HENRY, P., MR,

B. Mailing Address 6917 E COUNTY ROAD 225

City
GAINESVILLE

State
FL

Zip Code
32609-4319

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65377

Amount of Each Receipt this Period

45.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MAYS, DAVID, , MR,

C. Mailing Address 13703 MILLHOPPER RD

City
GAINESVILLE

State
FL

Zip Code
32653-2452

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 07 2025

Transaction ID : SA11A.63932

Amount of Each Receipt this Period

102.00

☐ Memo Item
CONTRIBUTION

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

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

197.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

MAYS, DAVID, , MR,

Mailing Address 13703 MILLHOPPER RD

City
GAINESVILLEState
FLZip Code
32653-2452FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

314.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		14		2025

Transaction ID : SA11A.64783

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MAYS, DAVID, , MR,

Mailing Address 13703 MILLHOPPER RD

City
GAINESVILLEState
FLZip Code
32653-2452FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

314.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2025

Transaction ID : SA11A.65372

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MAYS, DAVID, , MR,

Mailing Address 13703 MILLHOPPER RD

City
GAINESVILLEState
FLZip Code
32653-2452FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

314.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : SA11A.65373

Amount of Each Receipt this Period

30.00

☐ Memo Item
CONTRIBUTION

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

110.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

MCLAIN, RICHARD, L., MR, SR

Mailing Address 1308 JEFFERSON ST

City
CAINSVILLEState
MOZip Code
64632-9570FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 07 2025

Transaction ID : SA11A.64098

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MCLAIN, RICHARD, L., MR, SR

Mailing Address 1308 JEFFERSON ST

City
CAINSVILLEState
MOZip Code
64632-9570FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 28 2025

Transaction ID : SA11A.64099

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

MCLAIN, RICHARD, L., MR, SR

Mailing Address 1308 JEFFERSON ST

City
CAINSVILLEState
MOZip Code
64632-9570FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65500

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

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

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

156.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

MIDDLETON, GERALDINE, C., MS,

A. Mailing Address PO BOX 2607

City
PISMO BEACHState
CAZip Code
93448-2607FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 07 2025

Transaction ID : SA11A.63951

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTIONB. Full Name (Last, First, Middle Initial)
MIDDLETON, GERALDINE, C., MS,
Mailing Address PO BOX 2607City
PISMO BEACHState
CAZip Code
93448-2607FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 06 2025

Transaction ID : SA11A.65480

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTIONC. Full Name (Last, First, Middle Initial)
MIKA, KENNETH, , ,
Mailing Address P.O. BOX 532City
MOUNT FREEDOMState
NJZip Code
07970-0532FEC ID number of contributing
federal political committee.

C

Name of Employer
CAMPAIGN ENGINEOccupation
CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 22 2025

Transaction ID : SA11A.65862

Amount of Each Receipt this Period

2100.00

☐ Memo Item
CONTRIBUTION
IN KIND: LIST RENTAL

2600.00

SUBTOTAL of Receipts This Page (optional) ▶

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for CongressFull Name (Last, First, Middle Initial)
MILLER, MARY, VIRGINIA, MRS,

Mailing Address PO BOX 7543

City
HUNTSVILLEState
TXZip Code
77342-7543FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 14 2025

Transaction ID : SA11A.63715

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTIONFull Name (Last, First, Middle Initial)
NICKERSON, W. C., MR,

Mailing Address PO BOX 4781

City
LIVE OAKState
FLZip Code
32064-1508FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 02 2025

Transaction ID : SA11A.65327

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTIONFull Name (Last, First, Middle Initial)
ONION, WILLIAM, S., MR,

Mailing Address 5128 FAWN GROVE RD

City
PYLESVILLEState
MDZip Code
21132-1006FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 29 2025

Transaction ID : SA11A.64943

Amount of Each Receipt this Period

175.00

☐ Memo Item
CONTRIBUTION

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

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

525.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

ONION, WILLIAM, S., MR,

Mailing Address 5128 FAWN GROVE RD

City

PYLESVILLE

State

MD

Zip Code

21132-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

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

Transaction ID : SA11A.65756

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

PERELMAN, WAYNE, C., MR,

Mailing Address 4737 SABLE PINE CIR APT C1 BLDG 95

City

WEST PALM BEACH

State

FL

Zip Code

33417-2799

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

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

Transaction ID : SA11A.65348

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

PERRY, CYNTHIA, ANN, MS,

Mailing Address 10246 229TH LN

City

LIVE OAK

State

FL

Zip Code

32060-5872

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1036.00

Date of Receipt

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

Transaction ID : SA11A.63863

Amount of Each Receipt this Period

222.00

☐ Memo Item
CONTRIBUTION

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

672.00

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

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

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

FOR LINE NUMBER:
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

PERRY, CYNTHIA, ANN, MS,

A.

Mailing Address 10246 229TH LN

City

LIVE OAK

State

FL

Zip Code

32060-5872

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1036.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 13 2025

Transaction ID : SA11A.64871

Amount of Each Receipt this Period

148.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

PERRY, CYNTHIA, ANN, MS,

B.

Mailing Address 10246 229TH LN

City

LIVE OAK

State

FL

Zip Code

32060-5872

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1036.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 09 2025

Transaction ID : SA11A.65517

Amount of Each Receipt this Period

222.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

PERRY, CYNTHIA, ANN, MS,

C.

Mailing Address 10246 229TH LN

City

LIVE OAK

State

FL

Zip Code

32060-5872

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1036.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65518

Amount of Each Receipt this Period

148.00

☐ Memo Item
CONTRIBUTION

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

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

518.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

RETTNER, RONALD, M., ,

A.

Mailing Address 6 FAIRFIELD BOULEVARD
SUITE 1City
PALM VALLEYState
FLZip Code
32082-4628FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65253

Amount of Each Receipt this Period

3500.00

☐ Memo Item
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

RETTNER, RONALD, M., ,

Mailing Address 6 FAIRFIELD BOULEVARD
SUITE 1City
PALM VALLEYState
FLZip Code
32082-4628FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65254

Amount of Each Receipt this Period

3500.00

☐ Memo Item
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

REULING, RICHARD, K., MR,

Mailing Address 501 S LA POSADA CIR APT 343
APT 343City
GREEN VALLEYState
AZZip Code
85614-5108FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 09 2025

Transaction ID : SA11A.65338

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

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

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

7300.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

ROBERTS, AVERY, C., DR.,

A.

Mailing Address P.O. BOX 233

City

LAKE BUTLER

State

FL

Zip Code

32054-0233

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
TIMBER AND CATTLE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65152

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBINSON, BRUCE, W., MR.,

B.

Mailing Address P.O. BOX 1178

City

LAKE CITY

State

FL

Zip Code

32056-1178

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBINSON, KENNON, AND KENDRON

Occupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65146

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

RUSHING, BARBARA, P., MS,

C.

Mailing Address 3872 NE 17TH STREET CIR

City

OCALA

State

FL

Zip Code

34470-4938

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

355.00

Date of Receipt

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

Transaction ID : SA11A.63911

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

2800.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

RUSHING, BARBARA, P., MS,

A. Mailing Address 3872 NE 17TH STREET CIR

City
OCALAState
FLZip Code
34470-4938FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 25 2025

Transaction ID : SA11A.63912

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

RUSHING, BARBARA, P., MS,

B. Mailing Address 3872 NE 17TH STREET CIR

City
OCALAState
FLZip Code
34470-4938FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 27 2025

Transaction ID : SA11A.65697

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SALAFRIO, CARLO, , MR.,

C. Mailing Address 6305 NW 79TH TER

City
GAINESVILLEState
FLZip Code
32653-2953FEC ID number of contributing
federal political committee.

C

Name of Employer
ENVIRONMENTAL CONSULTING & DESIGNOccupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65143

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

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

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

350.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SCHMIDT, BARBARA, D., MR,

A. Mailing Address 11488 SW 82ND COURT RD

City
OCALAState
FLZip Code
34481-3565FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 29 2025

Transaction ID : SA11A.63676

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SCHMIDT, ROBERT, D., MR,

B. Mailing Address 11488 SW 82ND COURT RD

City
OCALAState
FLZip Code
34481-3565FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 14 2025

Transaction ID : SA11A.64125

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M., MRS,

C. Mailing Address 9778 SW COQUILLE CT

City
TUALATINState
ORZip Code
97062-9528FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

291.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 03 2025

Transaction ID : SA11A.64156

Amount of Each Receipt this Period

33.00

☐ Memo Item
CONTRIBUTION

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

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

383.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M., MRS,

A. Mailing Address 9778 SW COQUILLE CT

City
TUALATINState
ORZip Code
97062-9528FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

291.50

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		13		2025

Transaction ID : SA11A.64813

Amount of Each Receipt this Period

33.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M., MRS,

B. Mailing Address 9778 SW COQUILLE CT

City
TUALATINState
ORZip Code
97062-9528FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

291.50

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		02		2025

Transaction ID : SA11A.65444

Amount of Each Receipt this Period

38.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SCOTT, AUDREY, M., MRS,

C. Mailing Address 9778 SW COQUILLE CT

City
TUALATINState
ORZip Code
97062-9528FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

291.50

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		23		2025

Transaction ID : SA11A.65445

Amount of Each Receipt this Period

42.00

☐ Memo Item
CONTRIBUTION

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

113.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SHOEMAKER, SHIRLEY, L., MRS,

Mailing Address 10728 FORT ASHBY RD

City
KEYSERState
WVZip Code
26726-6229FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 07 2025

Transaction ID : SA11A.64171

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SHOEMAKER, SHIRLEY, L., MRS,

Mailing Address 10728 FORT ASHBY RD

City
KEYSERState
WVZip Code
26726-6229FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 28 2025

Transaction ID : SA11A.64172

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SHOEMAKER, SHIRLEY, L., MRS,

Mailing Address 10728 FORT ASHBY RD

City
KEYSERState
WVZip Code
26726-6229FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 03 2025

Transaction ID : SA11A.65663

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

250.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

STACHNIK, MARIE, E., MRS,

A. Mailing Address 8165 SW 117TH LOOP

City
OCALA

State
FL

Zip Code
34481-3571

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFC

Occupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 25 2025

Transaction ID : SA11A.63957

Amount of Each Receipt this Period

70.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

STACHNIK, MARIE, E., MRS,

B. Mailing Address 8165 SW 117TH LOOP

City
OCALA

State
FL

Zip Code
34481-3571

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFC

Occupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 02 2025

Transaction ID : SA11A.65431

Amount of Each Receipt this Period

70.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, ENGEL, MR,

C. Mailing Address 4601 LAFAYETTE AVE

City
FORT WORTH

State
TX

Zip Code
76107-3721

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEWART PLLC

Occupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 12 2025

Transaction ID : SA11A.64846

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

190.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)

Kat for Congress

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, ENGEL, MR,

A. Mailing Address 4601 LAFAYETTE AVE

City
FORT WORTHState
TXZip Code
76107-3721FEC ID number of contributing
federal political committee.

C

Name of Employer
STEWART PLLCOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 12 2025

Transaction ID : SA11A.64847

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEWART, SCOTT, ENGEL, MR,

B. Mailing Address 4601 LAFAYETTE AVE

City
FORT WORTHState
TXZip Code
76107-3721FEC ID number of contributing
federal political committee.

C

Name of Employer
STEWART PLLCOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 23 2025

Transaction ID : SA11A.65510

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

TAYLOR, MARGARETTA, , MS,

C. Mailing Address 120 EL BRILLO WAY

City
PALM BEACHState
FLZip Code
33480-4726FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 13 2025

Transaction ID : SA11A.64825

Amount of Each Receipt this Period

3000.00

☐ Memo Item
CONTRIBUTION

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

3100.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)
TOLAND, PATRICIA, A., MRS,

Mailing Address 8327 N KNOXVILLE AVE TRLR 100

City
PEORIA

State
IL

Zip Code
61615-2157

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 11 2025

Transaction ID : SA11A.63997

Amount of Each Receipt this Period

70.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
TOLAND, PATRICIA, A., MRS,

Mailing Address 8327 N KNOXVILLE AVE TRLR 100

City
PEORIA

State
IL

Zip Code
61615-2157

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 15 2025

Transaction ID : SA11A.64852

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
TOLAND, PATRICIA, A., MRS,

Mailing Address 8327 N KNOXVILLE AVE TRLR 100

City
PEORIA

State
IL

Zip Code
61615-2157

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 27 2025

Transaction ID : SA11A.65537

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

170.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

TRIBBLE, JOHN, R., MR, II

A.

Mailing Address 1327 LAWSON LN

City
MCLEANState
VAZip Code
22101-3639FEC ID number of contributing
federal political committee.

C

Name of Employer
TRIBBLE'S INC.Occupation
WHOLESALE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2025

Transaction ID : SA11A.64967

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

URBINA, ALBERT, G., MR,

Mailing Address 17238 BOCA CLUB BLVD APT 103
APT 103City
BOCA RATONState
FLZip Code
33487-1090FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2025

Transaction ID : SA11A.63702

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

URBINA, ALBERT, G., MR,

Mailing Address 17238 BOCA CLUB BLVD APT 103
APT 103City
BOCA RATONState
FLZip Code
33487-1090FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2025

Transaction ID : SA11A.63703

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

500.00

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

PAGE 52 OF 189

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

URBINA, ALBERT, G., MR,

Mailing Address 17238 BOCA CLUB BLVD APT 103
APT 103City
BOCA RATONState
FLZip Code
33487-1090FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 02 2025

Transaction ID : SA11A.65750

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

VOGELEY, LONA, E., MRS,

Mailing Address 1510 KING DR

City
DUNEDINState
FLZip Code
34698-4855FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 28 2025

Transaction ID : SA11A.63985

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

VOGELEY, LONA, E., MRS,

Mailing Address 1510 KING DR

City
DUNEDINState
FLZip Code
34698-4855FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 02 2025

Transaction ID : SA11A.65436

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

204.00

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

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

VOGELEY, LONA, E., MRS,

A. Mailing Address 1510 KING DR

City
DUNEDIN

State
FL

Zip Code
34698-4855

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFC

Occupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 24 2025

Transaction ID : SA11A.65437

Amount of Each Receipt this Period

52.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

WALKER, DOUGLAS, ALBERT, MR,

B. Mailing Address 3657 OAKDALE CIR APT 201

City
OVIEDO

State
FL

Zip Code
32765-8670

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFC

Occupation
INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 12 2025

Transaction ID : SA11A.65392

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

WALL, IRENE, B., MRS,

C. Mailing Address 119 SHAWNEE TRL

City
PRUDENVILLE

State
MI

Zip Code
48651-9727

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 02 2025

Transaction ID : SA11A.64043

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

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

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

502.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

WALL, IRENE, B., MRS,

Mailing Address 119 SHAWNEE TRL

City

PRUDENVILLE

State

MI

Zip Code

48651-9727

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 03 / 2025D D / Y Y Y Y Y
03 / 2025Y Y Y Y Y
2025

Transaction ID : SA11A.65778

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

A.

Full Name (Last, First, Middle Initial)

WASSERMAN, ELLIOT, T., MR,

Mailing Address 5200 SW 25TH BLVD UNIT 3216

UNIT 3216

City

GAINESVILLE

State

FL

Zip Code

32608-8923

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 02 / 2025D D / Y Y Y Y Y
02 / 2025Y Y Y Y Y
2025

Transaction ID : SA11A.65600

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

WHITMORE, GEORGE, D., MR,

Mailing Address 4516 SE 34TH PL

City

OCALA

State

FL

Zip Code

34480-1650

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2025D D / Y Y Y Y Y
03 / 2025Y Y Y Y Y
2025

Transaction ID : SA11A.63826

Amount of Each Receipt this Period

200.00

☐ Memo Item
CONTRIBUTION

C.

500.00

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

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

PAGE 55 OF 189

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)
WHITMORE, GEORGE, D., MR,

Mailing Address 4516 SE 34TH PL

City
OCALAState
FLZip Code
34480-1650FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		28		2025

Transaction ID : SA11A.63827

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTIONFull Name (Last, First, Middle Initial)
WHITMORE, GEORGE, D., MR,

Mailing Address 4516 SE 34TH PL

City
OCALAState
FLZip Code
34480-1650FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		04		2025

Transaction ID : SA11A.65587

Amount of Each Receipt this Period

150.00

☐ Memo Item
CONTRIBUTIONFull Name (Last, First, Middle Initial)
WHITMORE, GEORGE, D., MR,

Mailing Address 4516 SE 34TH PL

City
OCALAState
FLZip Code
34480-1650FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : SA11A.65588

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

400.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

ANDREW M SODL LLC

A.

Mailing Address 1617 SAN MARCO BOULEVARD

City
JACKSONVILLEState
FLZip Code
32207-3001FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65252

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

REFUNDED \$250.00 ON 06/30/2025

B.

Full Name (Last, First, Middle Initial)

GWINN BROTHERS LLC

Mailing Address 17233 99TH DR.

City
MC ALPINState
FLZip Code
32062-2516FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6350.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : SA11A.63245

Amount of Each Receipt this Period

3500.00

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW; VERIFIED AS
FEDERALLY PERMISSIBLE FUNDS

C.

Full Name (Last, First, Middle Initial)

GWINN, CLIFFORD, L., ,

Mailing Address 17233 99TH DR.

City
MC ALPINState
FLZip Code
32062-2516FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
FARMER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 28 2025

Transaction ID : SA11A.63427

Amount of Each Receipt this Period

3500.00

☒ Memo Item
CONTRIBUTIONVERIFIED AS FEDERALLY PERMISSIBLE FUNDS ;
PARTNERSHIP ATTRIBUTION

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

250.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

GWINN BROTHERS LLC

Mailing Address 17233 99TH DR.

City

MC ALPIN

State

FL

Zip Code

32062-2516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6350.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : SA11A.63246

Amount of Each Receipt this Period

2850.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW; VERIFIED AS
FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

GWINN, TERRY, , ,

Mailing Address 17233 99TH DR.

City

MC ALPIN

State

FL

Zip Code

32062-2516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

GWINN BROTHERS LLC

PARTNER

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2850.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 28 2025

Transaction ID : SA11A.63426

Amount of Each Receipt this Period

2850.00

☒ Memo Item

CONTRIBUTION

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS ;
PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

S & K BARRINGTON FARMS

Mailing Address 606 SW FREEDOM RD

City

MAYO

State

FL

Zip Code

32066-3932

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : SA11A.63244

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW; VERIFIED AS
FEDERALLY PERMISSIBLE FUNDS

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

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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)

Kat for Congress

Full Name (Last, First, Middle Initial)

BARRINGTON, KEVIN , , ,

A.

Mailing Address 600 SOUTHWEST FREEDOM ROAD

City
MAYO

State
FL

Zip Code
32066-3932

FEC ID number of contributing
federal political committee.

C

Name of Employer
S&K BARRINGTON

Occupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 17 2025

Transaction ID : SA11A.63336

Amount of Each Receipt this Period

250.00

☒ Memo Item
CONTRIBUTION

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;
PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

BARRINGTON, LISA, , ,

B.

Mailing Address 606 SOUTHWEST FREEDOM ROAD

City
MAYO

State
FL

Zip Code
32066-3932

FEC ID number of contributing
federal political committee.

C

Name of Employer
S&K BARRINGTON

Occupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 17 2025

Transaction ID : SA11A.63337

Amount of Each Receipt this Period

250.00

☒ Memo Item
CONTRIBUTION

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS;
PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

TILLIS FARMS, LLC

C.

Mailing Address P.O. BOX 1669

City
CHIEFLAND

State
FL

Zip Code
32644-1669

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : SA11A.63263

Amount of Each Receipt this Period

3500.00

☒ Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW; VERIFIED AS
FEDERALLY PERMISSIBLE FUNDS

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

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

TILLIS, MURRAY, L., ,

Mailing Address 11610 NE 20TH AVE

City
CHIEFLANDState
FLZip Code
32626-3587FEC ID number of contributing
federal political committee.

C

Name of Employer
TILLIS FARMS, LLCOccupation
PARTNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 30 2025

Transaction ID : SA11A.64409

Amount of Each Receipt this Period

3250.00

☒ Memo Item
CONTRIBUTIONVERIFIED AS FEDERALLY PERMISSIBLE FUNDS ;
PARTNERSHIP ATTRIBUTION

Full Name (Last, First, Middle Initial)

TILLIS FARMS, LLC

Mailing Address P.O. BOX 1669

City
CHIEFLANDState
FLZip Code
32644-1669FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : SA11A.63264

Amount of Each Receipt this Period

1500.00

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW; VERIFIED AS
FEDERALLY PERMISSIBLE FUNDS

Full Name (Last, First, Middle Initial)

TILLIS, MURRAY, L., ,

Mailing Address 11610 NE 20TH AVE

City
CHIEFLANDState
FLZip Code
32626-3587FEC ID number of contributing
federal political committee.

C

Name of Employer
TILLIS FARMS, LLCOccupation
PARTNER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 30 2025

Transaction ID : SA11A.64408

Amount of Each Receipt this Period

1750.00

☒ Memo Item
CONTRIBUTIONVERIFIED AS FEDERALLY PERMISSIBLE FUNDS ;
PARTNERSHIP ATTRIBUTION

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

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

0.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION CO

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2604

FEC ID number of contributing
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10869.43

Date of Receipt

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

Transaction ID : SA11C.64755

Amount of Each Receipt this Period

1500.00

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

GREENE, CHIP, , ,

Mailing Address 556 GRANADA TERRACE

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

HUB INTERNATIONAL

INSURANCE EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11A.64757

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTIONEARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC

Full Name (Last, First, Middle Initial)

SELEVAN, RUSSELL, , ,

Mailing Address 2734 ESTATES LANE

City

JACKSONVILLE

State

FL

Zip Code

32257-5764

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

JA-RU INC

EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : SA11A.64756

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTIONEARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC

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

1500.00

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION CO

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2604

FEC ID number of contributing
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10869.43

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 11 2025

Transaction ID : SA11C.65113

Amount of Each Receipt this Period

500.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

OSTFELD , DANIEL , , ,

Mailing Address 217 SOUTH ROSCOE BOULEVARD

City

PALM VALLEY

State

FL

Zip Code

32082-4360

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

OSTFELD ARCHITECTURE PPLC

ARCHITECH

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 03 2025

Transaction ID : SA11A.65114

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION CO

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2604

FEC ID number of contributing
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10869.43

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 25 2025

Transaction ID : SA11C.65191

Amount of Each Receipt this Period

3100.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

CRAIG, JEFFREY , , ,

A.

Mailing Address 1016 RIVER OAKS ROAD

City
JACKSONVILLEState
FLZip Code
32207-4110FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 19 2025

Transaction ID : SA11A.65194

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTIONEARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC**B.**

Full Name (Last, First, Middle Initial)

FREEDMAN, KAREN, , ,

Mailing Address 380 CLEARWATER DRIVE

City
PALM VALLEYState
FLZip Code
32082-4169FEC ID number of contributing
federal political committee.

C

Name of Employer
NOT EMPLOYEDOccupation
NOT EMPLOYED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 18 2025

Transaction ID : SA11A.65192

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTIONEARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC**C.**

Full Name (Last, First, Middle Initial)

ROBBINS , DAVID, , ,

Mailing Address 1125 BLACKSTONE BLDG 233 EAST BAY

City
JACKSONVILLEState
FLZip Code
32202-FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65197

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTIONEARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC

1750.00

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

SCHEDULE A (FEC Form 3)
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SELEVAN, RUSSELL, , ,

A.

Mailing Address 2734 ESTATES LANE

City

JACKSONVILLE

State

FL

Zip Code

32257-5764

FEC ID number of contributing
federal political committee.

C

Name of Employer

JA-RU INC

Occupation

EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : SA11A.65196

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTIONEARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC

B.

Full Name (Last, First, Middle Initial)

WATTS, JONATHAN, , ,

Mailing Address 2299 KEATON CHASE DRIVE

City

ORANGE PARK

State

FL

Zip Code

32003-8605

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	5

Transaction ID : SA11A.65195

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTIONEARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC

C.

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION CO

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2604

FEC ID number of contributing
federal political committee.

C

C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10869.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

Transaction ID : SA11C.65199

Amount of Each Receipt this Period

500.00

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

1250.00

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

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

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for each category of the
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

FISHER, JEFFREY, , ,

A.

Mailing Address 515 E 72ND ST
APT 30F

City
NEW YORK

State
NY

Zip Code
10021-4023

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOURO UNIVERSITY

Occupation
SPECIAL PROGRAMS ADMINISTRATOR

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 12 2025

Transaction ID : SA11A.65200

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION CO

B.

Mailing Address 251 H ST NW

City
WASHINGTON

State
DC

Zip Code
20001-2604

FEC ID number of contributing
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10869.43

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65257

Amount of Each Receipt this Period

250.00

☒ Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

PERLMAN, GARY, , ,

C.

Mailing Address 50 14TH AVENUE SOUTH

City
JACKSONVILLE BEACH

State
FL

Zip Code
32250-6300

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : SA11A.65258

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM AMERICAN ISRAEL PUBLIC
AFFAIRS COMMITTEE POLITIC

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

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

750.00

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

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)
WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y
04 14 2025

Transaction ID : SA11C.63273

Amount of Each Receipt this Period

1476.35

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)
ARTMAN, MARVIN, W., MR,

Mailing Address 6845 SW COUNTY ROAD 225

City
STARKE

State
FL

Zip Code
32091-6621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 08 2025

Transaction ID : SA11A.63333

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)
DEARING, RAYMOND, , ,

Mailing Address 19151 S,E56 COURT

City
INGLIS

State
FL

Zip Code
34449-

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y
04 08 2025

Transaction ID : SA11A.63331

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

152.05

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

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SMITH, CHRIS, , ,

A. Mailing Address 2082 WILLOW BEACH

City
KEEGO HARBOR

State
MI

Zip Code
48320-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M M / D D / Y Y Y Y Y
04 08 2025

Transaction ID : SA11A.63323

Amount of Each Receipt this Period

23.75

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WHITTEN, MICHELLE, SUE, ,

B. Mailing Address 344 RACE STREET

City
DENVER

State
CO

Zip Code
80206-4119

FEC ID number of contributing
federal political committee.

C

Name of Employer
GLOBAL DOWN SYNDROME FOUNDATION

Occupation
NON-PROFIT EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 08 2025

Transaction ID : SA11A.63276

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

C. Mailing Address P.O. BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y
04 21 2025

Transaction ID : SA11C.63338

Amount of Each Receipt this Period

785.05

☒ Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

523.75

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

BARLOCK, LAWRENCE, , ,

A. Mailing Address 18042 MIRASOL DRIVE

City
SAN DIEGO

State
CA

Zip Code
92128-1223

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 12 2025

Transaction ID : SA11A.63387

Amount of Each Receipt this Period

26.03

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

BUCINAY, RONALD, E., ,

B. Mailing Address 900 POPLAR HILL RD.

City
PROSPECT

State
TN

Zip Code
38477-6011

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 13 2025

Transaction ID : SA11A.63388

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

J, ANGELO, J., ,

C. Mailing Address 976 MC LEAN AVEUE

City
YONKERS

State
NY

Zip Code
10704-4105

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
CPA

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 17 2025

Transaction ID : SA11A.63343

Amount of Each Receipt this Period

47.50

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

123.53

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

LANDER, JOE, H., ,

A.

Mailing Address 3560 SW CR 334

City

TRENTON

State

FL

Zip Code

32693-6068

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 15 2025

Transaction ID : SA11A.63390

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SAYLES, STEPHEN, , ,

B.

Mailing Address 13950 SE 68TH LN

City

MORRISTON

State

FL

Zip Code

32668-4380

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 12 2025

Transaction ID : SA11A.63389

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

STARR, MARK, N., ,

C.

Mailing Address 8436 NW 4 PL

City

GAINESVILLE

State

FL

Zip Code

32607-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer

FLORIDA CREDIT UNION

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 14 2025

Transaction ID : SA11A.63340

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

402.05

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for CongressFull Name (Last, First, Middle Initial)
WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

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

Transaction ID : SA11C.63398

Amount of Each Receipt this Period

353.17

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLDFull Name (Last, First, Middle Initial)
HOOVER, LUCY, , ,

Mailing Address 133 ROBIN LANE

City
PANAMA CITYState
FLZip Code
32407-3940FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
FACULTY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	2	5

Transaction ID : SA11A.63401

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)
HUNT, SHEILA, , ,

Mailing Address 4604 NE 10TH PL

City
OCALAState
FLZip Code
34470-8171FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.24

Date of Receipt

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

Transaction ID : SA11A.63423

Amount of Each Receipt this Period

26.03

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

76.03

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SHOCKLEY, SANDY, , ,

A. Mailing Address 56 KINGSLEY CIRCLE

City

ORMOND BEACH

State

FL

Zip Code

32174-9213

FEC ID number of contributing
federal political committee.

C

Name of Employer
RADIO

Occupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

351.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 22 2025

Transaction ID : SA11A.63402

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

B. Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 05 2025

Transaction ID : SA11C.63435

Amount of Each Receipt this Period

9209.97

☒ Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

BILLINGS, MATTHEW, , ,

C. Mailing Address 200 WEST 67TH STREET APT 36A

City

NEW YORK

State

NY

Zip Code

10023-0366

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBINHOOD MARKETS

Occupation
FINANCIAL SERVICES

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.41

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 29 2025

Transaction ID : SA11A.63519

Amount of Each Receipt this Period

416.41

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

435.41

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

BROWN, REGINALD, , ,

Mailing Address 317 MANSION DR.

City

ALEXANDRIA

State

VA

Zip Code

22302-2904

FEC ID number of contributing
federal political committee.

C

Name of Employer

KIRKLAND ELLIS

Occupation

ATTORNEY

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2025

Transaction ID : SA11A.63523

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

GALLAGHER, DANIEL, , ,

Mailing Address 7900 RUXWOOD ROAD

City

TOWSON

State

MD

Zip Code

21204-3541

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROBINHOOD MARKETS

Occupation

ATTORNEY

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2025

Transaction ID : SA11A.63522

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

KERBRAT, JOHANN, , ,

Mailing Address 5750 HARBORD DR.

City

OAKLAND

State

CA

Zip Code

94611-3163

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROBINHOOD MARKETS INC

Occupation

SVP AND GM OF CRYPTO

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2025

Transaction ID : SA11A.63520

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

6500.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

MARKLE, JOHN, , ,

Mailing Address 5028 38TH STREET N

City
ARLINGTONState
VAZip Code
22207-2846FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBINHOOD MARKETS, INC.Occupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 29 2025

Transaction ID : SA11A.63518

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

QUIRK, STEVEN, , ,

Mailing Address 6122 FLAGG CREEK LANE

City
WESTERN SPRINGSState
ILZip Code
60558-5036FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBINHOODOccupation
EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 29 2025

Transaction ID : SA11A.63521

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SMITH, CHRIS, , ,

Mailing Address 2082 WILLOW BEACH

City
KEEGO HARBORState
MIZip Code
48320-1210FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M M / D D / Y Y Y Y Y
04 25 2025

Transaction ID : SA11A.63491

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

1269.00

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

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

TURNER, JOHN, M., ,

A. Mailing Address 1424 CRYSTAL SPRINGS ROAD

City

LINN CREEK

State

MO

Zip Code

65052-2037

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.24

Date of Receipt

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

Transaction ID : SA11A.63512

Amount of Each Receipt this Period

26.03

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

B. Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

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

Transaction ID : SA11C.64198

Amount of Each Receipt this Period

3763.32

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

AHERN, MICHAEL, , ,

C. Mailing Address 1201 NEW YORK AVE

City

WASHINGTON

State

DC

Zip Code

20005-3917

FEC ID number of contributing
federal political committee.

C

Name of Employer

STERNHELL GROUP

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11A.64201

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

526.03

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

ARTMAN, MARVIN, W., MR,

A.

Mailing Address 6845 SW COUNTY ROAD 225

City
STARKE

State
FL

Zip Code
32091-6621

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 04 2025

Transaction ID : SA11A.64241

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

CARNEY, CONOR, , ,

B.

Mailing Address 1804 VERMONT AVENUE NORTHWEST

City
WASHINGTON

State
DC

Zip Code
20001-5025

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROBINHOOD MARKETS, INC.

Occupation
GOVERNMENT AFFAIRS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 05 2025

Transaction ID : SA11A.64203

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

DEARING, RAYMOND, , ,

C.

Mailing Address 19151 S,E56 COURT

City
INGLIS

State
FL

Zip Code
34449-

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y
05 06 2025

Transaction ID : SA11A.64240

Amount of Each Receipt this Period

52.05

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

1152.05

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

GALVIN, SCOT, , ,

A. Mailing Address 395 EQUESTRIANS WAY

City

NEW SMYRNA BEACH

State

FL

Zip Code

32168-4116

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROBINHOOD SECURITES

Occupation

SR DIRECTOR AND COO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 06 2025

Transaction ID : SA11A.64242

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

LILES, WILLIAM, , ,

B. Mailing Address 2013 N INGLEWOOD ST

City

ARLINGTON

State

VA

Zip Code

22205-3150

FEC ID number of contributing
federal political committee.

C

Name of Employer

BLUE RIDGE LAW POLICY

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 06 2025

Transaction ID : SA11A.64200

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

MACKENZIE, JAMES, , ,

C. Mailing Address 123 SOUTH KENSINGTON AVE

City

LA GRANGE

State

IL

Zip Code

60525-2214

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROBINHOOD

Occupation

GENERAL MANAGER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 05 2025

Transaction ID : SA11A.64202

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

1750.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SMITH, CHRIS, , ,

A.

Mailing Address 2082 WILLOW BEACH

City

KEEGO HARBOR

State

MI

Zip Code

48320-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 08 2025

Transaction ID : SA11A.64227

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SMITH, CHRIS, , ,

B.

Mailing Address 2082 WILLOW BEACH

City

KEEGO HARBOR

State

MI

Zip Code

48320-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 03 2025

Transaction ID : SA11A.64230

Amount of Each Receipt this Period

9.50

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SMITH, CHRIS, , ,

C.

Mailing Address 2082 WILLOW BEACH

City

KEEGO HARBOR

State

MI

Zip Code

48320-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 01 2025

Transaction ID : SA11A.64235

Amount of Each Receipt this Period

23.75

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

42.75

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

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

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)
WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2025

Transaction ID : SA11C.64247

Amount of Each Receipt this Period

2453.73

☒ Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)
BARLOCK, LAWRENCE, , ,

Mailing Address 18042 MIRASOL DRIVE

City
SAN DIEGO

State
CA

Zip Code
92128-1223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 12 2025

Transaction ID : SA11A.64326

Amount of Each Receipt this Period

26.03

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)
BUCINAY, RONALD, E., ,

Mailing Address 900 POPLAR HILL RD.

City
PROSPECT

State
TN

Zip Code
38477-6011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 13 2025

Transaction ID : SA11A.64330

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

76.03

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

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

LANDER, JOE, H., ,

A.

Mailing Address 3560 SW CR 334

City

TRENTON

State

FL

Zip Code

32693-6068

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 08 2025

Transaction ID : SA11A.64332

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

LANDER, JOE, H., ,

B.

Mailing Address 3560 SW CR 334

City

TRENTON

State

FL

Zip Code

32693-6068

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 18 2025

Transaction ID : SA11A.64335

Amount of Each Receipt this Period

- 52.05

☐ Memo Item

CONTRIBUTION

EARMARKED BY WINRED - CHARGED BACK

Full Name (Last, First, Middle Initial)

NESSEL, ARIEL, , ,

C.

Mailing Address PO BOX 1128

City

ROSS

State

CA

Zip Code

94957-1128

FEC ID number of contributing
federal political committee.

C

Name of Employer

NESSEL DEVELOPMENT

Occupation

BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 09 2025

Transaction ID : SA11A.64251

Amount of Each Receipt this Period

1250.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

1250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SAYLES, STEPHEN, , ,

A.

Mailing Address 13950 SE 68TH LN

City

MORRISTON

State

FL

Zip Code

32668-4380

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : SA11A.64331

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SMITH, CHRIS, , ,

B.

Mailing Address 2082 WILLOW BEACH

City

KEEGO HARBOR

State

MI

Zip Code

48320-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	5	

Transaction ID : SA11A.64327

Amount of Each Receipt this Period

26.03

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

STARR, MARK, N., ,

C.

Mailing Address 8436 NW 4 PL

City

GAINESVILLE

State

FL

Zip Code

32607-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer

FLORIDA CREDIT UNION

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID : SA11A.64250

Amount of Each Receipt this Period

300.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

376.03

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)
WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 26 2025

Transaction ID : SA11C.64340

Amount of Each Receipt this Period

785.17

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLDFull Name (Last, First, Middle Initial)
HOOVER, LUCY, , ,

Mailing Address 133 ROBIN LANE

City
PANAMA CITYState
FLZip Code
32407-3940FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
FACULTY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 19 2025

Transaction ID : SA11A.64342

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)
HUNT, SHEILA, , ,

Mailing Address 4604 NE 10TH PL

City
OCALAState
FLZip Code
34470-8171FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 20 2025

Transaction ID : SA11A.64398

Amount of Each Receipt this Period

26.03

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

76.03

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

J, ANGELO, J., ,

A.

Mailing Address 976 MC LEAN AVEUE

City

YONKERS

State

NY

Zip Code

10704-4105

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
CPA

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 17 2025

Transaction ID : SA11A.64341

Amount of Each Receipt this Period

47.50

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

LANDER, JOE, H., ,

B.

Mailing Address 3560 SW CR 334

City

TRENTON

State

FL

Zip Code

32693-6068

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y
05 15 2025

Transaction ID : SA11A.64403

Amount of Each Receipt this Period

52.05

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SHAYS, LORRAINE, , ,

C.

Mailing Address 14659A CANALVIEW DRIVE
APT A

City

DELRAY BEACH

State

FL

Zip Code

33484-3775

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

465.36

Date of Receipt

M M / D D / Y Y Y Y Y
05 21 2025

Transaction ID : SA11A.64393

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

124.55

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

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

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

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(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SMITH, CHRIS, , ,

A.

Mailing Address 2082 WILLOW BEACH

City

KEEGO HARBOR

State

MI

Zip Code

48320-1210

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 21 2025

Transaction ID : SA11A.64382

Amount of Each Receipt this Period

10.41

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 02 2025

Transaction ID : SA11C.64418

Amount of Each Receipt this Period

4741.25

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

MOSKOWITZ, LUCAS, , ,

C.

Mailing Address 250 MASSACHUSETTS AVENUE NORTHWEST

City

WASHINGTON

State

DC

Zip Code

20001-5823

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROBINHOOD MARKETS, INC.

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 22 2025

Transaction ID : SA11A.64737

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

510.41

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SHAYS, LORRAINE, , ,

A.

Mailing Address 14659A CANALVIEW DRIVE

APT A

City

DELRAY BEACH

State

FL

Zip Code

33484-3775

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

465.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 25 2025

Transaction ID : SA11A.64669

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SHOCKLEY, SANDY, , ,

B.

Mailing Address 56 KINGSLEY CIRCLE

City

ORMOND BEACH

State

FL

Zip Code

32174-9213

FEC ID number of contributing
federal political committee.

C

Name of Employer

RADIO

Occupation

BUSINESS OWNER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

351.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 22 2025

Transaction ID : SA11A.64735

Amount of Each Receipt this Period

19.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

TURNER, JOHN, M., ,

C.

Mailing Address 1424 CRYSTAL SPRINGS ROAD

City

LINN CREEK

State

MO

Zip Code

65052-2037

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 25 2025

Transaction ID : SA11A.64703

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

70.03

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

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)
WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 09 2025

Transaction ID : SA11C.64969

Amount of Each Receipt this Period

7385.95

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLDFull Name (Last, First, Middle Initial)
ROSEN, DEAN, , ,

Mailing Address 240 KENTUCKY AVENUE SE

City
WASHINGTONState
DCZip Code
20003-2314FEC ID number of contributing
federal political committee.

C

Name of Employer

MEHLMAN CONSULTING

Occupation

GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 03 2025

Transaction ID : SA11A.64984

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)
SHAYS, LORRAINE, , ,Mailing Address 14659A CANALVIEW DRIVE
APT ACity
DELRAY BEACHState
FLZip Code
33484-3775FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

465.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 30 2025

Transaction ID : SA11A.65086

Amount of Each Receipt this Period

23.75

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

1023.75

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SHAYS, LORRAINE, , ,

A.

Mailing Address 14659A CANALVIEW DRIVE
APT ACity
DELRAY BEACHState
FLZip Code
33484-3775FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

465.36

Date of Receipt

M M / D D / Y Y Y Y Y
06 01 2025

Transaction ID : SA11A.65092

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

B.

Full Name (Last, First, Middle Initial)

SHAYS, LORRAINE, , ,

Mailing Address 14659A CANALVIEW DRIVE
APT ACity
DELRAY BEACHState
FLZip Code
33484-3775FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

465.36

Date of Receipt

M M / D D / Y Y Y Y Y
05 30 2025

Transaction ID : SA11A.65101

Amount of Each Receipt this Period

25.65

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

SMITH, CHRIS, , ,

Mailing Address 2082 WILLOW BEACH

City
KEEGO HARBORState
MIZip Code
48320-1210FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M M / D D / Y Y Y Y Y
05 29 2025

Transaction ID : SA11A.65081

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

69.65

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

WILEY, LAWRENCE, , ,

A.

Mailing Address 3009 ROTHMORE LANE

City

FITCHBURG

State

WI

Zip Code

53711-5878

FEC ID number of contributing
federal political committee.

C

Name of Employer

EPIC

Occupation

ATTORNEY

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 05 2025

Transaction ID : SA11A.64979

Amount of Each Receipt this Period

1500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WILEY, LAWRENCE, , ,

B.

Mailing Address 3009 ROTHMORE LANE

City

FITCHBURG

State

WI

Zip Code

53711-5878

FEC ID number of contributing
federal political committee.

C

Name of Employer

EPIC

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 05 2025

Transaction ID : SA11A.64980

Amount of Each Receipt this Period

3500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

C.

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 16 2025

Transaction ID : SA11C.65116

Amount of Each Receipt this Period

311.09

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

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

5000.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

BARLOCK, LAWRENCE, , ,

Mailing Address 18042 MIRASOL DRIVE

City
SAN DIEGOState
CAZip Code
92128-1223FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.24

Date of Receipt

M M / D D / Y Y Y Y Y
06 12 2025

Transaction ID : SA11A.65135

Amount of Each Receipt this Period

26.03

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

DEARING, RAYMOND, , ,

Mailing Address 19151 S,E56 COURT

City
INGLISState
FLZip Code
34449-FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y
06 06 2025

Transaction ID : SA11A.65138

Amount of Each Receipt this Period

52.05

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

ELRAD, RANDI, , ,

Mailing Address 8015 SW 42ND TERR

City
GAINESVILLEState
FLZip Code
32608-5112FEC ID number of contributing
federal political committee.

C

Name of Employer
CRIME PREVENTION SECURITY SYSTEMSOccupation
BUSINESS OWNER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5107.69

Date of Receipt

M M / D D / Y Y Y Y Y
06 12 2025

Transaction ID : SA11A.65139

Amount of Each Receipt this Period

23.75

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

101.83

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SAYLES, STEPHEN, , ,

A.

Mailing Address 13950 SE 68TH LN

City

MORRISTON

State

FL

Zip Code

32668-4380

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 12 2025

Transaction ID : SA11A.65137

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 23 2025

Transaction ID : SA11C.65160

Amount of Each Receipt this Period

183.08

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

BUCINAY, RONALD, E., ,

C.

Mailing Address 900 POPLAR HILL RD.

City

PROSPECT

State

TN

Zip Code

38477-6011

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 13 2025

Transaction ID : SA11A.65174

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

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

100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

LANDER, JOE, H., ,

Mailing Address 3560 SW CR 334

City
TRENTONState
FLZip Code
32693-6068FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

416.40

Date of Receipt

M M / D D / Y Y Y Y Y
06 15 2025

Transaction ID : SA11A.65175

Amount of Each Receipt this Period

52.05

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65221

Amount of Each Receipt this Period

342.32

☒ Memo Item
CONTRIBUTIONSEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

HOOVER, LUCY, , ,

Mailing Address 133 ROBIN LANE

City
PANAMA CITYState
FLZip Code
32407-3940FEC ID number of contributing
federal political committee.

C

Name of Employer
FLORIDA STATE UNIVERSITYOccupation
FACULTY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 19 2025

Transaction ID : SA11A.65223

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

102.05

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

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

HUNT, SHEILA, , ,

Mailing Address 4604 NE 10TH PL

City
OCALAState
FLZip Code
34470-8171FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.24

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65242

Amount of Each Receipt this Period

26.03

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

J, ANGELO, J., ,

Mailing Address 976 MC LEAN AVEUE

City
YONKERSState
NYZip Code
10704-4105FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
CPA

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

237.50

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA11A.65244

Amount of Each Receipt this Period

47.50

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SHOCKLEY, SANDY, , ,

Mailing Address 56 KINGSLEY CIRCLE

City
ORMOND BEACHState
FLZip Code
32174-9213FEC ID number of contributing
federal political committee.

C

Name of Employer
RADIOOccupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

351.50

Date of Receipt

M M / D D / Y Y Y Y Y
06 22 2025

Transaction ID : SA11A.65243

Amount of Each Receipt this Period

19.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

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

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

92.53

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

TURNER, JOHN, M., ,

A.

Mailing Address 1424 CRYSTAL SPRINGS ROAD

City

LINN CREEK

State

MO

Zip Code

65052-2037

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.24

Date of Receipt

M M / D D / Y Y Y Y Y
06 25 2025

Transaction ID : SA11A.65241

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

115955.92

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65259

Amount of Each Receipt this Period

3742.71

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

DUNKEL, ROBERT, , ,

C.

Mailing Address 98046 LITTLE PINEY ISLAND PT

City

FERNANDINA BEACH

State

FL

Zip Code

32034-0820

FEC ID number of contributing
federal political committee.

C

Name of Employer

DUNKEL GOVERNMENT RELATIONS

Occupation

BUSINESS OWNER

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65299

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

526.03

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

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

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

HELLMANN, RALPH, , ,

A.

Mailing Address 3310 OLD DOMINION BLVD

City

ALEXANDRIA

State

VA

Zip Code

22305-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer

HM STRATEGIES

Occupation

GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65265

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

PICKERING, ELISE, , ,

B.

Mailing Address 3721 TAFT AVE

City

ALEXANDRIA

State

VA

Zip Code

22304-2617

FEC ID number of contributing
federal political committee.

C

Name of Employer

MEHLMAN CONSULTING

Occupation

LOBBYIST

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65266

Amount of Each Receipt this Period

1750.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

SALVOSA, DON, , ,

C.

Mailing Address 1629 K STREET NW #300

City

WASHINGTON

State

DC

Zip Code

20006-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11A.65297

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

2750.00

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SMITH, CHRIS, , ,

A. Mailing Address 2082 WILLOW BEACH

City
KEEGO HARBORState
MIZip Code
48320-1210FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		29		2025

Transaction ID : SA11A.65275

Amount of Each Receipt this Period

26.03

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

B. Full Name (Last, First, Middle Initial)
SMITH, CHRIS, , ,

Mailing Address 2082 WILLOW BEACH

City
KEEGO HARBORState
MIZip Code
48320-1210FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

289.36

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		27		2025

Transaction ID : SA11A.65293

Amount of Each Receipt this Period

20.82

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

46.85

☐ Memo Item

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

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

82618.42

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

AMERICA'S HEALTH INSURANCE PLANS, INC. PAC (AHIP PAC)

Mailing Address 601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 500City
WASHINGTONState
DCZip Code
20004-2601FEC ID number of contributing
federal political committee.

C C00106740

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 25 2025

Transaction ID : SA11C.65201

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF OPHTHALMOLOGY INC POLITICAL COMMITTEE (O

Mailing Address 655 BEACH ST

City
SAN FRANCISCOState
CAZip Code
94109-1342FEC ID number of contributing
federal political committee.

C C00196246

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65836

Amount of Each Receipt this Period

1500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN DENTAL ASSOCIATION PAC

Mailing Address 1111 14TH ST NW
STE 1100City
WASHINGTONState
DCZip Code
20005-5627FEC ID number of contributing
federal political committee.

C C00000729

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 22 2025

Transaction ID : SA11C.63397

Amount of Each Receipt this Period

4000.00

☐ Memo Item
CONTRIBUTION

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

8000.00

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

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

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

AMERICAN GAS ASSOCIATION PAC

Mailing Address 400 N CAPITOL ST NW

400 N. CAPITOL ST., NW

City

WASHINGTON

State

DC

Zip Code

20001-1511

FEC ID number of contributing
federal political committee.

C C00007450

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : SA11C.65216

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 10TH ST NW

TWO CITYCENTER, SUITE 400

City

WASHINGTON

State

DC

Zip Code

20001-5189

FEC ID number of contributing
federal political committee.

C C00106146

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : SA11C.65203

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC

Mailing Address 220 LEIGH FARM RD

PALLADIAN 1

City

DURHAM

State

NC

Zip Code

27707-8110

FEC ID number of contributing
federal political committee.

C C00077321

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : SA11C.65213

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

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

4000.00

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

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

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION CO

Mailing Address 251 H ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2604

FEC ID number of contributing
federal political committee.

C C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10869.43

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65255

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN OPTOMETRIC ASSOCIATION PAC

Mailing Address 1505 PRINCE ST
STE 300

City

ALEXANDRIA

State

VA

Zip Code

22314-2874

FEC ID number of contributing
federal political committee.

C C00024968

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 10 2025

Transaction ID : SA11C.63270

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN OPTOMETRIC ASSOCIATION PAC

Mailing Address 1505 PRINCE ST
STE 300

City

ALEXANDRIA

State

VA

Zip Code

22314-2874

FEC ID number of contributing
federal political committee.

C C00024968

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65834

Amount of Each Receipt this Period

3000.00

☐ Memo Item
CONTRIBUTION

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

10000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 189

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

AMERICAN OPTOMETRIC ASSOCIATION PAC

A.

Mailing Address 1505 PRINCE ST
STE 300

City

ALEXANDRIA

State

VA

Zip Code

22314-2874

FEC ID number of contributing
federal political committee.

C C00024968

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11C.65835

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN SOYBEAN ASSOCIATION PAC (SOYPAC)

B.

Mailing Address 12647 OLIVE BLVD
STE 410

City

SAINT LOUIS

State

MO

Zip Code

63141-6345

FEC ID number of contributing
federal political committee.

C C00408468

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2025

Transaction ID : SA11C.65205

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

AT&T INC. EMPLOYEE FEDERAL PAC (AT&T EMPLOYEE FEDERAL PAC)

C.

Mailing Address 208 S AKARD ST
STE 1812

City

DALLAS

State

TX

Zip Code

75202-4206

FEC ID number of contributing
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2025

Transaction ID : SA11C.63433

Amount of Each Receipt this Period

1500.00

☐ Memo Item
CONTRIBUTION

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

4500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 189

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. AT&T INC. EMPLOYEE FEDERAL PAC (AT&T EMPLOYEE FEDERAL PAC)

Mailing Address 208 S AKARD ST
STE 1812City
DALLASState
TXZip Code
75202-4206FEC ID number of contributing
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65847

Amount of Each Receipt this Period

1500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK PAC)

Mailing Address 410 E 17TH AVE
STE 2200City
DENVERState
COZip Code
80203-1214FEC ID number of contributing
federal political committee.

C C00390583

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 26 2025

Transaction ID : SA11C.65212

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. CHARTER COMMUNICATIONS INC. PAC

Mailing Address 400 ATLANTIC ST
FL 10City
STAMFORDState
CTZip Code
06901-3512FEC ID number of contributing
federal political committee.

C C00426775

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65840

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

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

7000.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

COMCAST CORPORATION & NBCUNIVERSAL PAC - FEDERALMailing Address 1701 JOHN F KENNEDY BLVD
FL 49City
PHILADELPHIAState
PAZip Code
19103-2855FEC ID number of contributing
federal political committee.**C** C00248716

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2025

Transaction ID : SA11C.65209

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1275 PENNSYLVANIA AVE. NW STE. 601

City
WASHINGTONState
DCZip Code
20004-2444FEC ID number of contributing
federal political committee.**C** C00163832

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : SA11C.65142

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

EDWARDS LIFESCIENCES POLITICAL ACTION COMMITTEE (A.K.A. EDWA

Mailing Address ONE EDWARDS WAY

City
IRVINEState
CAZip Code
92614-5688FEC ID number of contributing
federal political committee.**C** C00411900

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : SA11C.65844

Amount of Each Receipt this Period

1000.00

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

4500.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)Mailing Address 1001 PENNSYLVANIA AVE NW
STE 710City
WASHINGTONState
DCZip Code
20004-2513FEC ID number of contributing
federal political committee.**C** C00197228

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		05		2025

Transaction ID : SA11C.63434

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

FERT PAC (THE PAC OF THE FERTILIZER INSTITUTE)Mailing Address 4201 WILSON BLVD
STE 700City
ARLINGTONState
VAZip Code
22203-4454FEC ID number of contributing
federal political committee.**C** C00085910

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : SA11C.65830

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

FOLEY & LARDNER POLITICAL FUND, INC.Mailing Address 3000 K ST NW
STE 600City
WASHINGTONState
DCZip Code
20007-5111FEC ID number of contributing
federal political committee.**C** C00105338

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : SA11C.65829

Amount of Each Receipt this Period

1000.00

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

6000.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

GENENTECH INC. PAC (GENENPAC)

A.

Mailing Address 1 DNA WAY

MS355A

City

SOUTH SAN FRANCISCO

State

CA

Zip Code

94080-4918

FEC ID number of contributing
federal political committee.

C

C00199257

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

Transaction ID : SA11C.64413

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

GENENTECH INC. PAC (GENENPAC)

Mailing Address 1 DNA WAY

MS355A

City

SOUTH SAN FRANCISCO

State

CA

Zip Code

94080-4918

FEC ID number of contributing
federal political committee.

C

C00199257

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

Transaction ID : SA11C.64414

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

GENERAL DYNAMICS CORPORATION PAC (GDC PAC)

Mailing Address 11011 SUNSET HILLS RD

City

RESTON

State

VA

Zip Code

20190-5311

FEC ID number of contributing
federal political committee.

C

C00078451

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : SA11C.65832

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL PAC

Mailing Address 101 CONSTITUTION AVE NW
STE 500

City
WASHINGTON

State
DC

Zip Code
20001-2133

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65845

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC

Mailing Address 20 F ST NW
STE 610

City
WASHINGTON

State
DC

Zip Code
20001-6707

FEC ID number of contributing
federal political committee.

C C00022343

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : SA11C.65214

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

INVESTMENT COMPANY INSTITUTE PAC (ICI PAC)

Mailing Address 1401 H ST NW
STE 1200

City
WASHINGTON

State
DC

Zip Code
20005-2110

FEC ID number of contributing
federal political committee.

C C00105981

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65842

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

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

8000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 103 OF 189

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

INVESTMENT COMPANY INSTITUTE PAC (ICI PAC)

A.

Mailing Address 1401 H ST NW
STE 1200

City
WASHINGTON

State
DC

Zip Code
20005-2110

FEC ID number of contributing
federal political committee.

C C00105981

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65843

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

KOCH INDUSTRIES, INC. PAC (KOCHPAC)

B.

Mailing Address 4111 E 37TH ST N

City
WICHITA

State
KS

Zip Code
67220-3203

FEC ID number of contributing
federal political committee.

C C00236489

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : SA11C.65218

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC

C.

Mailing Address 2121 CRYSTAL DR.
STE 100

City
ARLINGTON

State
VA

Zip Code
22202-3706

FEC ID number of contributing
federal political committee.

C C00303024

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : SA11C.65154

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

4500.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

MARATHON PETROLEUM CORPORATION EMPLOYEES PAC (MPAC)

Mailing Address 539 S MAIN ST

City
FINDLAYState
OHZip Code
45840-3229FEC ID number of contributing
federal political committee.**C** C00496307

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 26 2025

Transaction ID : SA11C.65217

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City
CHICAGOState
ILZip Code
60611-4011FEC ID number of contributing
federal political committee.**C** C00030718

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 07 2025

Transaction ID : SA11C.63524

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL AGRICULTURAL AVIATION ASSOCIATION AG-AV PAC

Mailing Address 1440 DUKE STREET

City
ALEXANDRIAState
VAZip Code
22314-3403FEC ID number of contributing
federal political committee.**C** C00341701

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 29 2025

Transaction ID : SA11C.64412

Amount of Each Receipt this Period

3000.00

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

10000.00

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMIT

Mailing Address 1 M STREET, SE

City

WASHINGTON

State

DC

Zip Code

20003-5125

FEC ID number of contributing
federal political committee.**C** C00009985

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : SA11C.65198

Amount of Each Receipt this Period

3000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL CATTLEMEN'S BEEF ASSOCIATION PAC (NCBA-PAC)Mailing Address 1275 PENNSYLVANIA AVE NW
STE 801

City

WASHINGTON

State

DC

Zip Code

20004-2434

FEC ID number of contributing
federal political committee.**C** C00028787

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA11C.65158

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL CORN GROWERS ASSOCIATION PAC (CORNPAC)Mailing Address 20 F ST NW
STE 900

City

WASHINGTON

State

DC

Zip Code

20001-6707

FEC ID number of contributing
federal political committee.**C** C00376343

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : SA11C.65831

Amount of Each Receipt this Period

1000.00

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

9000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

NATIONAL FEDERATION OF INDEPENDENT BUSINESS FEDERAL PAC**A.**Mailing Address 555 12TH ST NW
STE 1001City
WASHINGTONState
DCZip Code
20004-1267FEC ID number of contributing
federal political committee.**C** C00101105

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : SA11C.65846

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL MULTIFAMILY HOUSING COUNCIL PAC**B.**Mailing Address 1775 I ST NW
STE 1100City
WASHINGTONState
DCZip Code
20006-2424FEC ID number of contributing
federal political committee.**C** C00130773

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2025

Transaction ID : SA11C.65215

Amount of Each Receipt this Period

3000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND**C.**

Mailing Address 11250 WAPLES MILL RD

City
FAIRFAXState
VAZip Code
22030-7550FEC ID number of contributing
federal political committee.**C** C00053553

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : SA11C.65838

Amount of Each Receipt this Period

1000.00

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

5000.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

Mailing Address 66 CANAL CENTER PLZ
STE 300

City
ALEXANDRIA

State
VA

Zip Code
22314-1576

FEC ID number of contributing
federal political committee.

C C00089458

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65839

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL WOODEN PALLET AND CONTAINER ASSOCIATION PAC (PALLET

Mailing Address 1421 PRINCE ST
STE 340

City
ALEXANDRIA

State
VA

Zip Code
22314-2805

FEC ID number of contributing
federal political committee.

C C00668921

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : SA11C.65210

Amount of Each Receipt this Period

4000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NCTA - THE INTERNET & TELEVISION ASSOCIATION PAC (NCTAPAC)

Mailing Address 25 MASSACHUSETTS AVE NW
STE 100

City
WASHINGTON

State
DC

Zip Code
20001-1434

FEC ID number of contributing
federal political committee.

C C00010082

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025

Transaction ID : SA11C.65208

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

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

7500.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

NEXTERA ENERGY, INC. PAC

Mailing Address 801 PENNSYLVANIA AVE NW
STE 220

City
WASHINGTON

State
DC

Zip Code
20004-2679

FEC ID number of contributing
federal political committee.

C C00064774

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65848

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NOVARTIS CORPORATION PAC

Mailing Address 801 PENNSYLVANIA AVE NW
STE 700

City
WASHINGTON

State
DC

Zip Code
20004-2723

FEC ID number of contributing
federal political committee.

C C00033969

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : SA11C.65155

Amount of Each Receipt this Period

500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

NUCLEAR ENERGY INSTITUTE FEDERAL PAC

Mailing Address 1201 F ST NW
STE 1100

City
WASHINGTON

State
DC

Zip Code
20004-1218

FEC ID number of contributing
federal political committee.

C C00239848

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65841

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

2000.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

PHILLIPS 66 PAC

A.

Mailing Address 601 PENNSYLVANIA AVE NW
STE 1150N

City
WASHINGTON

State
DC

Zip Code
20004-3650

FEC ID number of contributing
federal political committee.

C C00513549

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 05 2025

Transaction ID : SA11C.63430

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

POWERPAC OF THE EDISON ELECTRIC INSTITUTE

B.

Mailing Address 701 PENNSYLVANIA AVENUE NW

City
WASHINGTON

State
DC

Zip Code
20004-2608

FEC ID number of contributing
federal political committee.

C C00095869

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11C.65256

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

PRICEWATERHOUSECOOPERS PAC I

C.

Mailing Address 655 NEW YORK AVE NW
STE 1100

City
WASHINGTON

State
DC

Zip Code
20001-5748

FEC ID number of contributing
federal political committee.

C C00107235

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : SA11C.65159

Amount of Each Receipt this Period

3000.00

☐ Memo Item
CONTRIBUTION

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

6500.00

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

SCHEDULE A (FEC Form 3)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

PUBLIX SUPER MARKETS, INC. ASSOCIATES PAC**A.**

Mailing Address P.O. BOX 407

City

LAKELAND

State

FL

Zip Code

33802-0407

FEC ID number of contributing
federal political committee.**C** C00400705

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025**Transaction ID : SA11C.65837**

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC**B.**Mailing Address 824 S MILLEDGE AVE
STE 101

City

ATHENS

State

GA

Zip Code

30605-1369

FEC ID number of contributing
federal political committee.**C** C00570226

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 29 2025**Transaction ID : SA11C.64415**

Amount of Each Receipt this Period

5000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

SOCIETY OF AMERICAN FLORISTS POLITICAL ACTION COMMITTEE**C.**Mailing Address 1001 NORTH FAIRFAX STREET
SUITE 201

City

ALEXANDRIA

State

VA

Zip Code

22314-1587

FEC ID number of contributing
federal political committee.**C** C00111302

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 26 2025**Transaction ID : SA11C.65206**

Amount of Each Receipt this Period

1000.00

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

8500.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SWEDISH MATCH NORTH AMERICA LLC PAC

Mailing Address 1021 E CARY ST
STE 1600

City
RICHMOND

State
VA

Zip Code
23219-4000

FEC ID number of contributing
federal political committee.

C C00215053

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 29 / 2025

Transaction ID : SA11C.64416

Amount of Each Receipt this Period

3000.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

TECO ENERGY INC EMPLOYEES' PAC

Mailing Address 702 N FRANKLIN ST

City
TAMPA

State
FL

Zip Code
33602-4429

FEC ID number of contributing
federal political committee.

C C00161422

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2025

Transaction ID : SA11C.65849

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION C

Mailing Address 4301 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22203-4419

FEC ID number of contributing
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 05 / 2025

Transaction ID : SA11C.63432

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

6500.00

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

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Kat for CongressFull Name (Last, First, Middle Initial)
UNITED EGG ASSOCIATION EGGPACMailing Address 6455 E JOHNS XING
STE 410City
JOHNS CREEKState
GAZip Code
30097-1568FEC ID number of contributing
federal political committee.**C** C00172841

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2025

Transaction ID : SA11C.65211

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTIONFull Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE, INC. PAC (UPSPAC)

Mailing Address 316 PENNSYLVANIA AVE SE - STE 300

City
WASHINGTONState
DCZip Code
20003-1173FEC ID number of contributing
federal political committee.**C** C00064766

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		27		2025

Transaction ID : SA11C.65220

Amount of Each Receipt this Period

2000.00

☐ Memo Item
CONTRIBUTIONFull Name (Last, First, Middle Initial)
UNITED STATES TELECOM ASSOCIATION PAC (TELECOMPAC)Mailing Address 601 NEW JERSEY AVE NW
STE 600City
WASHINGTONState
DCZip Code
20001-2993FEC ID number of contributing
federal political committee.**C** C00000984

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		05		2025

Transaction ID : SA11C.63429

Amount of Each Receipt this Period

1000.00

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

4000.00

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

SCHEDULE A (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

UNITED STATES PEANUT PAC (US PEANUT PAC)**A.**

Mailing Address 313 MASSACHUSETTS AVE NE

City

WASHINGTON

State

DC

Zip Code

20002-5701

FEC ID number of contributing
federal political committee.**C** C00502807

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7500.00

Date of Receipt

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

Transaction ID : SA11C.65207

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

VALERO ENERGY CORPORATION PAC**B.**

Mailing Address 1 VALERO WAY

City

SAN ANTONIO

State

TX

Zip Code

78249-1616

FEC ID number of contributing
federal political committee.**C** C00109546

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : SA11C.65204

Amount of Each Receipt this Period

2500.00

☐ Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)

VALUE IN ELECTING WOMEN PAC**C.**Mailing Address 228 S WASHINGTON ST
STE 115

City

ALEXANDRIA

State

VA

Zip Code

22314-5404

FEC ID number of contributing
federal political committee.**C** C00327189

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	5	

Transaction ID : SA11C.65833

Amount of Each Receipt this Period

5000.00

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

10000.00

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

SCHEDULE A (FEC Form 3)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

VERIZON COMMUNICATIONS, INC. PAC (VERIZON PAC)

A.

Mailing Address 1300 I ST NW

ATTN: TAYLOR CRAIG

City

WASHINGTON

State

DC

Zip Code

20005-3314

FEC ID number of contributing
federal political committee.

C C00186288

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2025

Transaction ID : SA11C.65156

Amount of Each Receipt this Period

3000.00

☐ Memo Item
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

VERIZON COMMUNICATIONS, INC. PAC (VERIZON PAC)

Mailing Address 1300 I ST NW

ATTN: TAYLOR CRAIG

City

WASHINGTON

State

DC

Zip Code

20005-3314

FEC ID number of contributing
federal political committee.

C C00186288

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2025

Transaction ID : SA11C.65157

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

WEYERHAEUSER COMPANY PAC

Mailing Address 220 OCCIDENTAL AVE S

City

SEATTLE

State

WA

Zip Code

98104-3120

FEC ID number of contributing
federal political committee.

C C00007948

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2025

Transaction ID : SA11C.63431

Amount of Each Receipt this Period

1000.00

☐ Memo Item
CONTRIBUTION

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

5000.00

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

133500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

AMERICAN VICTORY FUND

A.

Mailing Address 824 S MILLEDGE AVE
STE 101City
ATHENSState
GAZip Code
30605FEC ID number of contributing
federal political committee.

C C00758532

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25428.75

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA12.6635

Amount of Each Receipt this Period

18430.75

☐ Memo Item

TRANSFER FROM AFFILIATED

B.

Full Name (Last, First, Middle Initial)

AMERICAN VICTORY FUND

Mailing Address 824 S MILLEDGE AVE
STE 101City
ATHENSState
GAZip Code
30605FEC ID number of contributing
federal political committee.

C C00758532

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

25428.75

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA12.6636

Amount of Each Receipt this Period

6998.00

☐ Memo Item

TRANSFER TO AFFILIATED

C.

Full Name (Last, First, Middle Initial)

AMERICAN VICTORY FUND

Mailing Address 824 S MILLEDGE AVE
STE 101City
ATHENSState
GAZip Code
30605-1369FEC ID number of contributing
federal political committee.

C C00758532

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

108236.95

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA12.65853

Amount of Each Receipt this Period

5985.25

☐ Memo Item

TRANSFER

TRANSFER OF NET JFC FUNDS

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

31414.00

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

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

PAGE 116 OF 189

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

ANDERSON, JOE, H., MR., III

Mailing Address P.O. BOX 346

City
OLD TOWNState
FLZip Code
32680-0346FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA.65185.7.2506

Amount of Each Receipt this Period

1250.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)

ANDERSON, MARION, D., ,

Mailing Address P.O. BOX 38

City
OLD TOWNState
FLZip Code
32680-0038FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA.65184.7.2506

Amount of Each Receipt this Period

1250.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)

BRANNAN, ROBERT, C., MR.,

Mailing Address 10654 HILLSIDE DRIVE EAST

City
MACCLENNYState
FLZip Code
32063-4337FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA.65179.7.2506

Amount of Each Receipt this Period

400.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

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

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

0.00

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

PAGE 117 OF 189

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

CRAPPS, DANIEL, D., MR.,

Mailing Address 291 NW MAIN BLVD

City
LAKE CITYState
FLZip Code
32055-3308FEC ID number of contributing
federal political committee.

C

Name of Employer
DANIEL CRAPPS REALTYOccupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA.65178.7.2506

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)

DICKS, STEVEN, , MR.,

Mailing Address 804 SE FEAGLE AVE

City
LAKE CITYState
FLZip Code
32025-2546FEC ID number of contributing
federal political committee.

C

Name of Employer
STEVEN DICKS FARMOccupation
CATTLEMAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA.65183.7.2506

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)

FERREIRA, V, TODD, ,

Mailing Address 702 CHIPSHOT DRIVE

City
MACCLENNYState
FLZip Code
32063-4302FEC ID number of contributing
federal political committee.

C

Name of Employer
FERREIRA FUNERALOccupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA.65823.7.2506

Amount of Each Receipt this Period

1500.00

☒ Memo Item

TRANSFER

PARTNERSHIP ATTRIB: BEACHES MEMORIAL
SERVICES LLC

0.00

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

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

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

PAGE 118 OF 189

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

FERREIRA, V, TODD, ,

A. Mailing Address 702 CHIPSHOT DRIVE

City
MACCLENNYState
FLZip Code
32063-4302FEC ID number of contributing
federal political committee.

C

Name of Employer
FERREIRA FUNERALOccupation
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 20 / 2025

Transaction ID : SA.65824.7.2506

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

PARTNERSHIP ATTRIB: FERREIRA FUNERAL
SERVICES

Full Name (Last, First, Middle Initial)

KINMONTH, STAN, A., MR, III

B. Mailing Address 194 MALLEY COVE LN

City
FLEMING ISLANDState
FLZip Code
32003-6104FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2021

Transaction ID : SA.35221.7.2506

Amount of Each Receipt this Period

40.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)

PHILLIP, MISTY, , ,

C. Mailing Address 16234 CHASEMORE DRIVE

City
SPRINGState
TXZip Code
77379-6602FEC ID number of contributing
federal political committee.

C

Name of Employer
SPARK MEDIA LLCOccupation
EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2025

Transaction ID : SA.65251.7.2506

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

0.00

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

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

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

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)

Kat for CongressFull Name (Last, First, Middle Initial)
PRITCHETT, PHILLIP, W., MR.,

Mailing Address P.O. BOX 311

City
LAKE BUTLERState
FLZip Code
32054-0311FEC ID number of contributing
federal political committee.

C

Name of Employer
PRITCHETT TRUCKINGOccupation
VICE PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 08 2025

Transaction ID : SA.65852.7.2506

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)
SANCHEZ, HERMAN, , MR., III

Mailing Address 479 NE 446TH ST

City
OLD TOWNState
FLZip Code
32680-7759FEC ID number of contributing
federal political committee.

C

Name of Employer
SANCHEZ FARMSOccupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 08 2025

Transaction ID : SA.65851.7.2506

Amount of Each Receipt this Period

2750.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)
SEDLEY, RONALD , ,

Mailing Address 17950 LAKE ESTATES DRIVE

City
BOCA RATONState
FLZip Code
33496-1428FEC ID number of contributing
federal political committee.

C

Name of Employer
RAS AUTO SALESOccupation
BUSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : SA.64417.7.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

PARTNERSHIP ATTRIB: RAS AUTO SALES LLC

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

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

0.00

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

PAGE 120 OF 189

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

SHAW, MICHAEL, H., MR.,

Mailing Address P.O. BOX 357

City
MAYOState
FLZip Code
32066-0357FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
AGRIBUSINESS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA.65182.7.2506

Amount of Each Receipt this Period

2500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)

STRAUB, SUSAN, J., MRS.,

Mailing Address 5034 ARAPAHOE STREET

City
SHAWNEEState
KSZip Code
66226-2809FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 20 2025

Transaction ID : SA.65189.7.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)

TOWNSEND, ANGELA, B., MRS.,

Mailing Address 2622 COUNTY ROAD 249

City
LIVE OAKState
FLZip Code
32060-8149FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFCOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 08 2025

Transaction ID : SA.65850.7.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

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

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

0.00

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

PAGE 121 OF 189

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

WARING, ELIZABETH, J., MRS.,

A. Mailing Address 736 PROMENADE POINTE DR.

City
SAINT AUGUSTINEState
FLZip Code
32095-6854FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : SA.65180.7.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

B. Full Name (Last, First, Middle Initial)
WARING, LUCAS, M., MR.,
Mailing Address 736 PROMENADE POINTE DRIVECity
ST. AUGUSTINEState
FLZip Code
32095-6854FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID : SA.65181.7.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

C. Full Name (Last, First, Middle Initial)
BEACHES MEMORIAL SERVICES LLC
Mailing Address 702 CHIPSHOT DRIVECity
MACCLENNYState
FLZip Code
32063-4302FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : SA.65187.7.2506

Amount of Each Receipt this Period

1500.00

☒ Memo Item

TRANSFER

SEE PARTNERSHIP ATTRIB

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

0.00

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

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

PAGE 122 OF 189

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Kat for CongressFull Name (Last, First, Middle Initial)
FERREIRA FUNERAL SERVICES

Mailing Address 702 CHIPSHOT DRIVE

City
MACCLENNYState
FLZip Code
32063-4302FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : SA.65186.7.2506

Amount of Each Receipt this Period

1000.00

☒ Memo Item

TRANSFER

SEE PARTNERSHIP ATTRIB

Full Name (Last, First, Middle Initial)
RAS AUTO SALES LLC

Mailing Address 17950 LAKE ESTATES DRIVE

City
BOCA RATONState
FLZip Code
33496-1428FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : SA.63071.7.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

SEE PARTNERSHIP ATTRIB

Full Name (Last, First, Middle Initial)
AMERICAN VICTORY FUNDMailing Address 824 S MILLEDGE AVE
STE 101City
ATHENSState
GAZip Code
30605-1369FEC ID number of contributing
federal political committee.

C C00758532

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

108236.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA12.65854

Amount of Each Receipt this Period

2408.54

☐ Memo Item

TRANSFER

TRANSFER OF NET JFC FUNDS

2408.54

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

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

PAGE 123 OF 189

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)

Kat for Congress

Full Name (Last, First, Middle Initial)

PHILLIP, MISTY, , ,

A.

Mailing Address 16234 CHASEMORE DRIVE

City
SPRINGState
TXZip Code
77379-6602FEC ID number of contributing
federal political committee.

C

Name of Employer
SPARK MEDIA LLCOccupation
EXECUTIVE

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : SA.65251.8.2506

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

B.

Full Name (Last, First, Middle Initial)

SEDLEY, RONALD , , ,

Mailing Address 17950 LAKE ESTATES DRIVE

City
BOCA RATONState
FLZip Code
33496-1428FEC ID number of contributing
federal political committee.

C

Name of Employer
RAS AUTO SALESOccupation
BUSINESS OWNER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	5

Transaction ID : SA.64417.8.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

PARTNERSHIP ATTRIB: RAS AUTO SALES LLC

C.

Full Name (Last, First, Middle Initial)

STRAUB, SUSAN, J., MRS.,

Mailing Address 5034 ARAPAHOE STREET

City
SHAWNEEState
KSZip Code
66226-2809FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFOccupation
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : SA.65189.8.2506

Amount of Each Receipt this Period

1500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 124 OF 189

☐ 11a ☐ 11b ☐ 11c ☐ 11d
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)
TOWNSEND, ANGELA, B., MRS.,

Mailing Address 2622 COUNTY ROAD 249

City
LIVE OAK

State
FL

Zip Code
32060-8149

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 08 2025

Transaction ID : SA.65850.8.2506

Amount of Each Receipt this Period

1850.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)
WARING, ELIZABETH, J., MRS.,

Mailing Address 736 PROMENADE POINTE DR.

City
SAINT AUGUSTINE

State
FL

Zip Code
32095-6854

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : SA.65180.8.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

Full Name (Last, First, Middle Initial)
WARING, LUCAS, M., MR.,

Mailing Address 736 PROMENADE POINTE DRIVE

City
ST. AUGUSTINE

State
FL

Zip Code
32095-6854

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 20 2025

Transaction ID : SA.65181.8.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

TRANSFER FROM JFC

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 11d
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

RAS AUTO SALES LLC

Mailing Address 17950 LAKE ESTATES DRIVE

City
BOCA RATON

State
FL

Zip Code
33496-1428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2025

Transaction ID : SA.63071.8.2506

Amount of Each Receipt this Period

3500.00

☒ Memo Item

TRANSFER

SEE PARTNERSHIP ATTRIB

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y 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)..... ▶

0.00

33822.54

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

PAGE 126 OF 189

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. BAYTAN, GABRIEL, , ,

Mailing Address 2289 NW 16TH TER

City
GAINESVILLEState
FLZip Code
32605Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

416.67

Transaction ID : SB17.I5342

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BAYTAN, GABRIEL, , ,

Mailing Address 2289 NW 16TH TER

City
GAINESVILLEState
FLZip Code
32605Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

416.67

Transaction ID : SB17.I5418

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BAYTAN, GABRIEL, , ,

Mailing Address 2289 NW 16TH TER

City
GAINESVILLEState
FLZip Code
32605Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

416.67

Transaction ID : SB17.I6509

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

1250.01

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CANDLER , CHRIS , , ,

Mailing Address 264 NORTHEAST HERNANDO AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2025

City
LAKE CITYState
FLZip Code
32055-4012

FEC Identification Number

C

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2102.00

Transaction ID : SB17.65861

☐ Memo Item IN KIND: FACILITY RENTAL

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. DUFRESNE, DEREK , , ,

Mailing Address 3627 10TH ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2025

City
WASHINGTONState
DCZip Code
20010-1403

FEC Identification Number

C

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2100.00

Transaction ID : SB17.65860

☐ Memo Item IN-KIND: LIST RENTAL

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. ELLESON, JOHN , , ,

Mailing Address 7526 CAMDEN HARBOUR DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2025

City
BRADENTONState
FLZip Code
34212

FEC Identification Number

C

Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1108.14

Transaction ID : SB17.I6497

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

5310.14

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

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

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. MALLARD, HALLIE, , ,

Mailing Address 111 NW 16TH ST

City
GAINESVILLEState
FLZip Code
32603Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I5413

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MALLARD, HALLIE, , ,

Mailing Address 111 NW 16TH ST

City
GAINESVILLEState
FLZip Code
32603Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I6490

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MALLARD, HALLIE, , ,

Mailing Address 111 NW 16TH ST

City
GAINESVILLEState
FLZip Code
32603Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I6563

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

1500.00

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

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

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. MIKA, KENNETH, , ,

Mailing Address P.O. BOX 532

City
MOUNT FREEDOMState
NJZip Code
07970-0532Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2100.00

Transaction ID : SB17.65862

☐ Memo Item IN KIND: LIST RENTAL

Full Name (Last, First, Middle Initial)

B. SANDRIDGE, ADELINE, , ,Mailing Address 6268 ROSE HILL DR.
APT 2BCity
ALEXANDRIAState
VAZip Code
22310Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

833.33

Transaction ID : SB17.I5339

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SANDRIDGE, ADELINE, , ,Mailing Address 6268 ROSE HILL DR.
APT 2BCity
ALEXANDRIAState
VAZip Code
22310Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

833.33

Transaction ID : SB17.I5419

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

3766.66

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

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

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. ASCENT STRATEGIC

Mailing Address P.O. BOX 80219

City
CHARLESTONState
SCZip Code
29416Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I5340

☐ Memo Item**B. ASCENT STRATEGIC**

Mailing Address P.O. BOX 80219

City
CHARLESTONState
SCZip Code
29416Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.I5416

☐ Memo Item**C. ASCENT STRATEGIC**

Mailing Address P.O. BOX 80219

City
CHARLESTONState
SCZip Code
29416Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

926.00

Transaction ID : SB17.I6511

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

2926.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. ASCENT STRATEGIC

Mailing Address P.O. BOX 80219

City
CHARLESTONState
SCZip Code
29416Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3011.63

Transaction ID : SB17.I6522

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BETTER MOUSETRAP DIGITALMailing Address 6501 RED HOOK PLZ
STE 201City
ST THOMASState
VIZip Code
00802Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

441.75

Transaction ID : SB17.I5392

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BETTER MOUSETRAP DIGITALMailing Address 6501 RED HOOK PLZ
STE 201City
ST THOMASState
VIZip Code
00802Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

54.55

Transaction ID : SB17.I5404

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

3507.93

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. BETTER MOUSETRAP DIGITALMailing Address 6501 RED HOOK PLZ
STE 201City
ST THOMASState
VIZip Code
00802Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

489.57

Transaction ID : SB17.I5421

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BETTER MOUSETRAP DIGITALMailing Address 6501 RED HOOK PLZ
STE 201City
ST THOMASState
VIZip Code
00802Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

256.28

Transaction ID : SB17.I6467

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BETTER MOUSETRAP DIGITALMailing Address 6501 RED HOOK PLZ
STE 201City
ST THOMASState
VIZip Code
00802Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

229.02

Transaction ID : SB17.I6493

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

974.87

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. BETTER MOUSETRAP DIGITALMailing Address 6501 RED HOOK PLZ
STE 201City
ST THOMASState
VIZip Code
00802Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

41.80

Transaction ID : SB17.I6513

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BETTER MOUSETRAP DIGITALMailing Address 6501 RED HOOK PLZ
STE 201City
ST THOMASState
VIZip Code
00802Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

106.32

Transaction ID : SB17.I6621

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN ENGINE GROUP LLCMailing Address 161 CENTER GROVE ROAD
BOX 217City
RANDOLPHState
NJZip Code
07869Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5287.09

Transaction ID : SB17.I6553

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

5435.21

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

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

PAGE 134 OF 189

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CAMPAIGN ENGINE GROUP LLCMailing Address 161 CENTER GROVE ROAD
BOX 217City
RANDOLPHState
NJZip Code
07869Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

388.22

Transaction ID : SB17.I6554

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN ENGINE GROUP LLCMailing Address 161 CENTER GROVE ROAD
BOX 217City
RANDOLPHState
NJZip Code
07869Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5017.08

Transaction ID : SB17.I6555

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 1ST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

181.28

Transaction ID : SB17.I6536

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

5586.58

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CATERING FOR ALL OCCASIONS

Mailing Address 1445 SOUTHWEST MAIN BOULEVARD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

City
LAKE CITYState
FLZip Code
32055-1109

FEC Identification Number

Purpose of Disbursement
EVENT CATERING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1	8	0	6	.	3	5
---	---	---	---	---	---	---

Transaction ID : SB17.I6538

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. CHASE BANK

Mailing Address 1111 POLARIS PKWY

Date of Disbursement

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

City
COLUMBUSState
OHZip Code
43240

FEC Identification Number

Purpose of Disbursement
SEE MEMOS

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

7	2	0	9	.	6	8
---	---	---	---	---	---	---

Transaction ID : SB17.I5368

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. AMAZON

Mailing Address 410 TERRY AVE N

Date of Disbursement

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

City
SEATTLEState
WAZip Code
98109

FEC Identification Number

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1	4	0	3	.	3	1
---	---	---	---	---	---	---

Transaction ID : SB17.I5370

☒ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

9	0	1	6	.	0	3
---	---	---	---	---	---	---

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 4405 SW COLLEGE RD

City
OCALAState
FLZip Code
34474Purpose of Disbursement
TELEPHONE SERVICES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

579.78

Transaction ID : SB17.I5373

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CENTRAL MICHEL RICHARD

Mailing Address 1001 PENNSYLVANIA AVENUE NORTHWEST

City
WASHINGTONState
DCZip Code
20004-2505Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

207.20

Transaction ID : SB17.I5389

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FAIRFIELD SUITES

Mailing Address 5355 MIRA SORRENTO PL

City
SAN DIEGOState
CAZip Code
92121Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

243.07

Transaction ID : SB17.I5378

☒ Memo Item

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. GODADDY.COM

Mailing Address 14455 N HAYDEN RD

City
SCOTTSDALEState
AZZip Code
85260Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2576.97

Transaction ID : SB17.I5376

☒ Memo Item**B. PRINT RUNNER**

Mailing Address 8000 HASKELL AVE

City
VAN NUYSState
CAZip Code
91406Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1628.88

Transaction ID : SB17.I5377

☒ Memo Item**C. RIVERSIDE FM, INC**

Mailing Address 9840 INTERNATIONAL DR.

City
ORLANDOState
FLZip Code
32819Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

88.00

Transaction ID : SB17.I5385

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. STREAMYARD.COMMailing Address 169 MADISON AVE
STE 11218City
NEW YORKState
NYZip Code
10016Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

89.98

Transaction ID : SB17.I5387

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. WIX.COM

Mailing Address 100 GANSEVOORT ST

City
NEW YORKState
NYZip Code
10014Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.00

Transaction ID : SB17.I5388

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CHASE BANK

Mailing Address 1111 POLARIS PKWY

City
COLUMBUSState
OHZip Code
43240Purpose of Disbursement
SEE MEMOS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4121.88

Transaction ID : SB17.I5422

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

4121.88

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. AMAZON

Mailing Address 410 TERRY AVE N

City
SEATTLEState
WAZip Code
98109Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

45.32

Transaction ID : SB17.I5454

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. APPLE

Mailing Address 1 APPLE PARK WAY

City
CUPERTINOState
CAZip Code
95014Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.19

Transaction ID : SB17.I5453

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. BOX INC

Mailing Address 900 JEFFERSON AVE

City
REDWOOD CITYState
CAZip Code
94063Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

549.04

Transaction ID : SB17.I5451

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CHIPOLTE

Mailing Address 610 NEWPORT CENTER DR.

City
NEWPORT BEACHState
CAZip Code
92660Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

193.84

Transaction ID : SB17.I5450

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. COURTYARD

Mailing Address 901 L ST NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

174.63

Transaction ID : SB17.I5449

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. ENVELOPES.COM

Mailing Address 7248 SOUTH HARL AVENUE

City
TEMPEState
AZZip Code
85283Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

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

Disbursement For:

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

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1227.37

Transaction ID : SB17.I5445

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. GODADDY.COM

Mailing Address 14455 N HAYDEN RD

Date of Disbursement

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

City
SCOTTSDALEState
AZZip Code
85260

FEC Identification Number

C

Purpose of Disbursement
SOFTWARE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

42.16

Transaction ID : SB17.I5447

☒ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. OFF THE BEET

Mailing Address 517 NORTH MAIN STREET

Date of Disbursement

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

City
TRENTONState
FLZip Code
32693

FEC Identification Number

C

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

296.63

Transaction ID : SB17.I5441

☒ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

C. PRINT RUNNER

Mailing Address 8000 HASKELL AVE

Date of Disbursement

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

City
VAN NUYSState
CAZip Code
91406

FEC Identification Number

C

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

505.53

Transaction ID : SB17.I5446

☒ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. STREAMYARD.COMMailing Address 169 MADISON AVE
STE 11218City
NEW YORKState
NYZip Code
10016Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

44.99

Transaction ID : SB17.I5440

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. WEB ELECTMailing Address 10150 HIGHLAND MANOR DR.
STE 200City
TAMPAState
FLZip Code
33610Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

470.00

Transaction ID : SB17.I5456

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. WIX.COM

Mailing Address 100 GANSEVOORT ST

City
NEW YORKState
NYZip Code
10014Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

360.00

Transaction ID : SB17.I5439

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CHASE BANK

Mailing Address 1111 POLARIS PKWY

City
COLUMBUSState
OHZip Code
43240Purpose of Disbursement
SEE MEMOS

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7422.54

Transaction ID : SB17.I6574

☐ Memo Item**B. AMAZON**

Mailing Address 410 TERRY AVE N

City
SEATTLEState
WAZip Code
98109Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

26.17

Transaction ID : SB17.I6576

☒ Memo Item**C. AMERICAN AIRLINES**

Mailing Address 433 AMON CARTER BLVD

City
FORT WORTHState
TXZip Code
76155Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

85.74

Transaction ID : SB17.I6577

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

7422.54

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 4405 SW COLLEGE RD

City
OCALAState
FLZip Code
34474Purpose of Disbursement
TELEPHONE SERVICES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

555.66

Transaction ID : SB17.I6580

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. BOX INC

Mailing Address 900 JEFFERSON AVE

City
REDWOOD CITYState
CAZip Code
94063Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

94.52

Transaction ID : SB17.I6582

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. CHASE BANK

Mailing Address 1111 POLARIS PKWY

City
COLUMBUSState
OHZip Code
43240Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.I6595

☒ Memo Item

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CHASE BANK

Mailing Address 1111 POLARIS PKWY

City
COLUMBUSState
OHZip Code
43240Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

83.02

Transaction ID : SB17.I6599

☒ Memo Item**B. CHIPOTLE**

Mailing Address 3841 SW ARCHER RD

City
GAINESVILLEState
FLZip Code
32608Purpose of Disbursement
EVENT CATERING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

307.82

Transaction ID : SB17.I6583

☒ Memo Item**C. COSTCO**

Mailing Address 2441 MARKET ST NE

City
WASHINGTONState
DCZip Code
20018Purpose of Disbursement
EVENT CATERING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3178.55

Transaction ID : SB17.I6584

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. COURTYARD

Mailing Address 901 L ST NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

174.63

Transaction ID : SB17.I6585

☒ Memo Item**B. DELTA AIR LINES**

Mailing Address 1030 DELTA BLVD

City
ATLANTAState
GAZip Code
30354Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

74.88

Transaction ID : SB17.I6587

☒ Memo Item**C. ENVELOPES.COM**

Mailing Address 7248 SOUTH HARL AVENUE

City
TEMPEState
AZZip Code
85283Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

908.03

Transaction ID : SB17.I6589

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. GACRAA

Mailing Address 3880 NE 39TH AVE

City
GAINESVILLEState
FLZip Code
32609Purpose of Disbursement
PARKING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

59.00

Transaction ID : SB17.I6591

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 N HAYDEN RD

City
SCOTTSDALEState
AZZip Code
85260Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

191.76

Transaction ID : SB17.I6588

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. RIVERSIDE FM, INC

Mailing Address 9840 INTERNATIONAL DR.

City
ORLANDOState
FLZip Code
32819Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

44.00

Transaction ID : SB17.I6600

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. STREAMYARD.COMMailing Address 169 MADISON AVE
STE 11218City
NEW YORKState
NYZip Code
10016Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

89.98

Transaction ID : SB17.I6601

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL EXPENSE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

233.73

Transaction ID : SB17.I6602

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. WIX.COM

Mailing Address 100 GANSEVOORT ST

City
NEW YORKState
NYZip Code
10014Purpose of Disbursement
WEBSITE SERVICES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

24.00

Transaction ID : SB17.I6604

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. YOUNG CHOW

Mailing Address 6997 WEST COMMERCIAL BOULEVARD

City
TAMARACState
FLZip Code
33319Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

239.19

Transaction ID : SB17.I6581

☒ Memo Item**B. CLASSIC CITY BANK**

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

80.00

Transaction ID : SB17.I5348

☐ Memo Item**C. CLASSIC CITY BANK**

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.I5399

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

120.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CLASSIC CITY BANK

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I5400

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CLASSIC CITY BANK

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I5407

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CLASSIC CITY BANK

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.I5423

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

80.00

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

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

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CLASSIC CITY BANK

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I6475

☐ Memo Item**B. CLASSIC CITY BANK**

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I6527

☐ Memo Item**C. CLASSIC CITY BANK**

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.I6539

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

80.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CLASSIC CITY BANK

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I6556

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CLASSIC CITY BANK

Mailing Address 2365 W BROAD ST

City
ATHENSState
GAZip Code
30606Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.I6573

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CMDIMailing Address 1595 SPRING HILL ROAD
SUITE 500City
MCLEANState
VAZip Code
22102Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.I5395

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

940.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CMDIMailing Address 1595 SPRING HILL ROAD
SUITE 500City
MCLEANState
VAZip Code
22102Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.I6476

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CMDIMailing Address 1595 SPRING HILL ROAD
SUITE 500City
MCLEANState
VAZip Code
22102Purpose of Disbursement
SOFTWARE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.I6535

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONVERSION CREATIVE

Mailing Address P.O. BOX 80219

City
CHARLESTONState
SCZip Code
29416Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I5341

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

2300.00

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

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

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. CONVERSION CREATIVE

Mailing Address P.O. BOX 80219

City
CHARLESTONState
SCZip Code
29416Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

96.45

Transaction ID : SB17.I5401

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONVERSION CREATIVE

Mailing Address P.O. BOX 80219

City
CHARLESTONState
SCZip Code
29416Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I5417

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONVERSION CREATIVE

Mailing Address P.O. BOX 80219

City
CHARLESTONState
SCZip Code
29416Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I6523

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

1096.45

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

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

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. DEMOCRACY ENGINE

Mailing Address 416 FLORIDA AVE NW #26418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		28		2025

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

0.50

Transaction ID : SB17.I6488

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEMOCRACY ENGINE

Mailing Address 416 FLORIDA AVE NW #26418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2025

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17.I6498

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEMOCRACY ENGINE

Mailing Address 416 FLORIDA AVE NW #26418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2025

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.I6525

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

100.50

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. DEMOCRACY ENGINE

Mailing Address 416 FLORIDA AVE NW #26418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2025

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.I6557

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DEMOCRACY ENGINE

Mailing Address 416 FLORIDA AVE NW #26418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

155.00

Transaction ID : SB17.I6558

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DEMOCRACY ENGINE

Mailing Address 416 FLORIDA AVE NW #26418

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2025

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For:

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

12.50

Transaction ID : SB17.I6641

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

192.50

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. DICKINSON WRIGHT PLLCMailing Address 1825 EYE STREET NW
SUITE 900City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

26856.50

Transaction ID : SB17.I5412

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DICKINSON WRIGHT PLLCMailing Address 1825 EYE STREET NW
SUITE 900City
WASHINGTONState
DCZip Code
20006Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1738.50

Transaction ID : SB17.I6487

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL FUNDRAISING, LLCMailing Address 20130 LAKEVIEW CENTER PLZ
STE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I5428

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

29095.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL FUNDRAISING, LLCMailing Address 20130 LAKEVIEW CENTER PLZ
STE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7221.52

Transaction ID : SB17.I5431

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT MAIL PROCESSORS

Mailing Address 1150 CONRAD CT

City
HAGERSTOWNState
MDZip Code
21740Purpose of Disbursement
SHIPPING EXPENSE

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1136.20

Transaction ID : SB17.I5432

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL PROCESSORS

Mailing Address 1150 CONRAD CT

City
HAGERSTOWNState
MDZip Code
21740Purpose of Disbursement
CAGING AND ESCROW

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

697.18

Transaction ID : SB17.I6505

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

9054.90

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

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

PAGE 159 OF 189

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL PROCESSORS

Mailing Address 1150 CONRAD CT

City
HAGERSTOWNState
MDZip Code
21740Purpose of Disbursement
CAGING AND ESCROW

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1347.60

Transaction ID : SB17.I6627

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIVERSE NEW MEDIA CORPORATION

Mailing Address 2824 SW 17TH AVE

City
FORT LAUDERDALEState
FLZip Code
33315Purpose of Disbursement
DIGITAL CONSULTING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3950.00

Transaction ID : SB17.I5420

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DONORBUREAU

Mailing Address 1900 N CULPEPER ST

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
STATISTICAL MODELING

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

112.14

Transaction ID : SB17.I5433

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

5409.74

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. ELITE CARD PROCESSING

Mailing Address 13701 MAUGANSVILLE RD

City
HAGERSTOWNState
MDZip Code
21740Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

176.51

Transaction ID : SB17.I5426

☐ Memo Item**B. ELITE CARD PROCESSING**

Mailing Address 13701 MAUGANSVILLE RD

City
HAGERSTOWNState
MDZip Code
21740Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

186.13

Transaction ID : SB17.I6499

☐ Memo Item**C. ELITE CARD PROCESSING**

Mailing Address 13701 MAUGANSVILLE RD

City
HAGERSTOWNState
MDZip Code
21740Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

94.50

Transaction ID : SB17.I6624

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

457.14

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. FILLYAW COMPANY LIMITED LLC

Mailing Address 2076 SW 188TH ST

City
NEWBERRYState
FLZip Code
32669Purpose of Disbursement
CAMPAIGN OFFICE RENT

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I5414

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FILLYAW COMPANY LIMITED LLC

Mailing Address 2076 SW 188TH ST

City
NEWBERRYState
FLZip Code
32669Purpose of Disbursement
CAMPAIGN OFFICE RENT

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I6489

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FILLYAW COMPANY LIMITED LLC

Mailing Address 2076 SW 188TH ST

City
NEWBERRYState
FLZip Code
32669Purpose of Disbursement
CAMPAIGN OFFICE RENT

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I6560

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

1500.00

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

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

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. FRONTLINE STRATEGIES, LLC

Mailing Address 4 HOLLY LN

City
MOHNTONState
PAZip Code
19540Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

38.00

Transaction ID : SB17.I6468

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRONTLINE STRATEGIES, LLC

Mailing Address 4 HOLLY LN

City
MOHNTONState
PAZip Code
19540Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.I6484

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRONTLINE STRATEGIES, LLC

Mailing Address 4 HOLLY LN

City
MOHNTONState
PAZip Code
19540Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

489.37

Transaction ID : SB17.I6495

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

587.37

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 163 OF 189

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. FRONTLINE STRATEGIES, LLC

Mailing Address 4 HOLLY LN

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

City
MOHNTONState
PAZip Code
19540

FEC Identification Number

C

Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

376.67

Transaction ID : SB17.I6515

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. FULFILLMENT SOLUTIONS INC

Mailing Address 44970 FALCON PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2025

City
STERLINGState
VAZip Code
20166

FEC Identification Number

C

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1962.92

Transaction ID : SB17.I6506

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. FULFILLMENT SOLUTIONS INC

Mailing Address 44970 FALCON PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2025

City
STERLINGState
VAZip Code
20166

FEC Identification Number

C

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3324.59

Transaction ID : SB17.I6508

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

5664.18

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. FULFILLMENT SOLUTIONS INC

Mailing Address 44970 FALCON PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2025

City
STERLINGState
VAZip Code
20166

FEC Identification Number

C

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1693.91

Transaction ID : SB17.I6629

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. FULFILLMENT SOLUTIONS INC

Mailing Address 44970 FALCON PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2025

City
STERLINGState
VAZip Code
20166

FEC Identification Number

C

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3239.71

Transaction ID : SB17.I6631

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. FULFILLMENT SOLUTIONS INC

Mailing Address 44970 FALCON PL

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2025

City
STERLINGState
VAZip Code
20166

FEC Identification Number

C

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

7339.88

Transaction ID : SB17.I6632

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

12273.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 165 OF 189

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. FULFILMENT SOLUTIONS, INC

Mailing Address 31137 WIEGMAN RD

City
HAYWARDState
CAZip Code
94544Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3704.44

Transaction ID : SB17.I5437

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. G & G CONSULTING & STRATEGY GROUPMailing Address 601 N MAIN ST
3159City
JACKSONVILLEState
FLZip Code
32202Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5212.22

Transaction ID : SB17.I5338

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. G & G CONSULTING & STRATEGY GROUPMailing Address 601 N MAIN ST
3159City
JACKSONVILLEState
FLZip Code
32202Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4265.57

Transaction ID : SB17.I5402

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

13182.23

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. GILCHRIST REC

Mailing Address 5579 SE 91ST TRL

City
TRENTONState
FLZip Code
32693Purpose of Disbursement
EVENT SPONSORSHIP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.I5409

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GILCHRIST REC

Mailing Address 5579 SE 91ST TRL

City
TRENTONState
FLZip Code
32693Purpose of Disbursement
EVENT SPONSORSHIP

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.I6567

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HALPATTER BREWING COMPANY

Mailing Address 264 NORTHEAST HERNANDO AVENUE

City
LAKE CITYState
FLZip Code
32055-4012Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

227.95

Transaction ID : SB17.I6541

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1077.95

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 167 OF 189

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. HICKORY DATA LLCMailing Address 121 NORTH WASHINGTON STREET
#300City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

264.31

Transaction ID : SB17.I6483

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HICKORY DATA LLCMailing Address 121 NORTH WASHINGTON STREET
#300City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

399.75

Transaction ID : SB17.I6494

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HICKORY DATA LLCMailing Address 121 NORTH WASHINGTON STREET
#300City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

45.93

Transaction ID : SB17.I6514

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

709.99

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 168 OF 189

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. HICKORY DATA LLCMailing Address 121 NORTH WASHINGTON STREET
#300City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

34.64

Transaction ID : SB17.I6531

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HSP DIRECT LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

1001.17

Transaction ID : SB17.I5429

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HSP DIRECT LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

969.11

Transaction ID : SB17.I5434

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2004.92

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 169 OF 189

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. HSP DIRECT LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL MANAGEMENT

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1725.00

Transaction ID : SB17.I6501

☐ Memo Item**B. HSP DIRECT LLC**

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

905.51

Transaction ID : SB17.I6507

☐ Memo Item**C. HSP DIRECT LLC**

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

788.11

Transaction ID : SB17.I6630

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3418.62

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. MDI IMAGING

Mailing Address 21955 CASCADES PKWY

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

City
STERLINGState
VAZip Code
20166

FEC Identification Number

C

Purpose of Disbursement
PRINTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2001.24

Transaction ID : SB17.I5435

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. MIDDLETOWN VALLEY BANK

Mailing Address 11325 RANDOM HILLS RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		04		2025

City
FAIRFAXState
VAZip Code
22030

FEC Identification Number

C

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

48.38

Transaction ID : SB17.I5427

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. MIDDLETOWN VALLEY BANK

Mailing Address 11325 RANDOM HILLS RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		02		2025

City
FAIRFAXState
VAZip Code
22030

FEC Identification Number

C

Purpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

67.57

Transaction ID : SB17.I6500

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

2117.19

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 171 OF 189

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. MIDDLETOWN VALLEY BANK

Mailing Address 11325 RANDOM HILLS RD

City
FAIRFAXState
VAZip Code
22030Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

51.15

Transaction ID : SB17.I6625

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MITCHELLS CATERING

Mailing Address 17195 SW 135TH LN

City
ARCHERState
FLZip Code
32618Purpose of Disbursement
EVENT CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3499.00

Transaction ID : SB17.I6526

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MITCHELLS CATERING

Mailing Address 17195 SW 135TH LN

City
ARCHERState
FLZip Code
32618Purpose of Disbursement
EVENT CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1308.63

Transaction ID : SB17.I6537

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4858.78

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. MITCHELLS CATERING

Mailing Address 17195 SW 135TH LN

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2025

City
ARCHERState
FLZip Code
32618Purpose of Disbursement
EVENT CATERING

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

3400.00

Transaction ID : SB17.I6540

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ONPOINT DATA STRATEGY LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		10		2025

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL PROCESSING

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1030.05

Transaction ID : SB17.I5430

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ONPOINT DATA STRATEGY LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL PROCESSING

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

356.78

Transaction ID : SB17.I5436

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4786.83

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 173 OF 189

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. ONPOINT DATA STRATEGY LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

323.04

Transaction ID : SB17.I5438

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ONPOINT DATA STRATEGY LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

379.59

Transaction ID : SB17.I6502

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ONPOINT DATA STRATEGY LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

629.40

Transaction ID : SB17.I6504

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1332.03

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. ONPOINT DATA STRATEGY LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DIRECT MAIL PROCESSING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

320.00

Transaction ID : SB17.I6626

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ONPOINT DATA STRATEGY LLC

Mailing Address 20130 LAKEVIEW CENTER PLZ

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
LIST RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

268.18

Transaction ID : SB17.I6628

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. POLITICOIN

Mailing Address P.O. BOX 532

City
MOUNT FREEDOMState
NJZip Code
07970Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		03		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

5673.18

Transaction ID : SB17.I5343

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6261.36

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. POLITICoin

Mailing Address P.O. BOX 532

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	5

City
MOUNT FREEDOMState
NJZip Code
07970

FEC Identification Number

C

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5017.08

Transaction ID : SB17.I5460

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. POLITICoin

Mailing Address P.O. BOX 532

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	2	5

City
MOUNT FREEDOMState
NJZip Code
07970

FEC Identification Number

C

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

627.07

Transaction ID : SB17.I5461

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. PROFESSIONAL DATA SERVICES INCMailing Address 824 S MILLEDGE AVE
STE 101

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	5

City
ATHENSState
GAZip Code
30605

FEC Identification Number

C

Purpose of Disbursement
COMPLIANCE SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4105.00

Transaction ID : SB17.I6518

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

9749.15

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES INCMailing Address 824 S MILLEDGE AVE
STE 101City
ATHENSState
GAZip Code
30605Purpose of Disbursement
COMPLIANCE SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2024.50

Transaction ID : SB17.I6519

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REID POLITICAL CONSULTINGMailing Address 611 PENNSYLVANIA AVE SE
STE 396City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9450.00

Transaction ID : SB17.I5344

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REID POLITICAL CONSULTINGMailing Address 611 PENNSYLVANIA AVE SE
STE 396City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20675.00

Transaction ID : SB17.I5415

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

32149.50

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. REID POLITICAL CONSULTINGMailing Address 611 PENNSYLVANIA AVE SE
STE 396City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

28807.90

Transaction ID : SB17.I6472

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SHUTTS & BOWENMailing Address 215 S MONROE ST
STE 804City
TALLAHASSEEState
FLZip Code
32301Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

31715.75

Transaction ID : SB17.I5345

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TMA DIRECT, INC.

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

128.25

Transaction ID : SB17.I5361

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

60651.90

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. TMA DIRECT, INC.

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.27

Transaction ID : SB17.I5393

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TMA DIRECT, INC.

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

26.48

Transaction ID : SB17.I5405

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TMA DIRECT, INC.

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

132.50

Transaction ID : SB17.I5425

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

172.25

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. TMA DIRECT, INC.

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

22.67

Transaction ID : SB17.I5458

☐ Memo Item**B. TMA DIRECT, INC.**

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

157.53

Transaction ID : SB17.I6469

☐ Memo Item**C. TMA DIRECT, INC.**

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

34.03

Transaction ID : SB17.I6485

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

214.23

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. TMA DIRECT, INC.

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

2151.97

Transaction ID : SB17.I6496

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TMA DIRECT, INC.

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

64.83

Transaction ID : SB17.I6516

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TMA DIRECT, INC.

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

64.12

Transaction ID : SB17.I6532

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2280.92

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 181 OF 189

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. TMA DIRECT, INC.

Mailing Address 1900 RESTON METRO PLZ

City
RESTONState
VAZip Code
20190Purpose of Disbursement
DIGITAL MARKETING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

8.54

Transaction ID : SB17.I6642

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WALDORF ASTORIA WASHINGTON DC

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		15		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

3499.00

Transaction ID : SB17.I5464

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WALDORF ASTORIA WASHINGTON DC

Mailing Address 1100 PENNSYLVANIA AVE NW

City
WASHINGTONState
DCZip Code
20004Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

3499.00

Transaction ID : SB17.I6474

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

7006.54

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. WILLIS PENDLETON LLC

Mailing Address 15047 OXFORD ST

City
OVERLAND PARKState
KSZip Code
66224Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.I5466

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.15

Transaction ID : SB17.I5360

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

58.19

Transaction ID : SB17.I5391

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5059.34

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

31.03

Transaction ID : SB17.I5403

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.95

Transaction ID : SB17.I5410

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

378.06

Transaction ID : SB17.I5424

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

423.04

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

162.59

Transaction ID : SB17.I5457

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

111.09

Transaction ID : SB17.I6466

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

31.04

Transaction ID : SB17.I6482

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

304.72

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

187.37

Transaction ID : SB17.I6492

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

291.27

Transaction ID : SB17.I6512

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

12.28

Transaction ID : SB17.I6530

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

490.92

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 186 OF 189

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7.22

Transaction ID : SB17.I6547

☐ Memo Item**B. WINRED TECHNICAL SERVICES**

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.54

Transaction ID : SB17.I6565

☐ Memo Item**C. WINRED TECHNICAL SERVICES**

Mailing Address P.O. BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

147.51

Transaction ID : SB17.I6622

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

168.27

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
FACILITY RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
06 / 16 / 2025

FEC Identification Number

C C00797670

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.I6534

☐ 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:

Category/
Type

Date of Disbursement

M M / D D / 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:

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶

278439.81

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 188 OF 189

<input type="checkbox"/> 17	<input checked="" type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN VICTORY FUNDMailing Address 824 S MILLEDGE AVE
STE 101City
ATHENSState
GAZip Code
30605Purpose of Disbursement
TRANSFER TO COVER JFC EXPENSES

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C C00758532

Amount of Each Disbursement this Period

18430.75

Transaction ID : SB18.I6470

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	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:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

18430.75

TOTAL This Period (last page this line number only).....▶

18430.75

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 189 OF 189

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Kat for Congress

Full Name (Last, First, Middle Initial)

A. ANDREW M SODL LLC

Mailing Address 1617 SAN MARCO BOULEVARD

City
JACKSONVILLEState
FLZip Code
32207-3001Purpose of Disbursement
REFUND

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB20A.16651

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	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:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

250.00

TOTAL This Period (last page this line number only).....▶

250.00