

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

Office Use Only

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

12FE4M5

LIGHT THE WAY FUND

ADDRESS (number and street)

502 6TH ST

Check if different
than previously
reported. (ACC)

HUDSON

WI

54016-1783

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00938274

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

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

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

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

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

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

Type or Print Name of Treasurer

DATWYLER, THOMAS, , ,

Signature of Treasurer

DATWYLER, THOMAS, , ,

Date

M M M /

D D D /

Y Y Y Y Y Y

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

LIGHT THE WAY FUND

Report Covering the Period: From: MM / DD / YYYY 01 / 01 / 2026 To: MM / DD / YYYY 03 / 31 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, YYYY YYYY	2026	0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	28750.00	28750.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	28750.00	28750.00
7. Total Disbursements (from Line 31)	20971.20	20971.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7778.80	7778.80
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

LIGHT THE WAY FUND

Report Covering the Period:

From:

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

To:

M M / D D / Y Y Y Y
03 31 2026**I. Receipts****COLUMN A**
Total This Period**COLUMN B**
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

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

28750.00

28750.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

28750.00

28750.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

28750.00

28750.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

28750.00

28750.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

28750.00

28750.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	7103.90	7103.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7103.90	7103.90
22. Transfers to Affiliated/Other Party Committees.....	13867.30	13867.30
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20971.20	20971.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20971.20	20971.20

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	28750.00	28750.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28750.00	28750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7103.90	7103.90
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7103.90	7103.90

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

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

FOR LINE NUMBER: PAGE 6 OF 14
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

LIGHT THE WAY FUND

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

A. AFENDOU LIS, STEPHEN, , ,

Mailing Address 314 BELLE ISLE AVE

City
BELLEAIR BEACH

State
FL

Zip Code
33786

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VARNUM LLP

Occupation (for Individual)
SENIOR LEGAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 / 31 / 2026

Transaction ID : A41D3918F95034B6694A

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. CONA III, STEVE, , ,

Mailing Address 12910 FRAMINGHAM COURT

City
TAMPA

State
FL

Zip Code
33626

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ABC FLORIDA GULF COAST CHAPTER

Occupation (for Individual)
PRESIDENT/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

03 / 31 / 2026

Transaction ID : A0291CF5029D74E83B23

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. CORDO, VINCENT, , ,

Mailing Address 4416 W MELROSE AVE

City
TAMPA

State
FL

Zip Code
33629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOLLAND & KNIGHT

Occupation (for Individual)
CHIEF CLIENT RELATIONS AND OPP

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

02 / 23 / 2026

Transaction ID : A0DD96835B1A14D8D862

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 7 OF 14
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIGHT THE WAY FUND

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

A. GONZALEZ, ELIECER, , ,

Mailing Address 3002 BRYAN RD

City
BRANDON

State
FL

Zip Code
33511

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HUMANITARY MEDICAL CENTER

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

03 / 30 / 2026

Transaction ID : AECA4E3C2712942C589A

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

B. GONZALEZ, ELIECER, , ,

Mailing Address 6607 N DALE MABRY HWY

City
TAMPA

State
FL

Zip Code
33614-3985

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HUMANITARY MEDICAL CENTER

Occupation (for Individual)
PRESIDENT/FOUDNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

03 / 31 / 2026

Transaction ID : A11DC5185DD0D4BBF9AA

Amount of Each Receipt this Period

6000.00

☐ Memo Item

IN-KIND:EVENT, FOOD, CATERING, STAFF,
DECORATIONS

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

C. GRAHAM, ANDREW, , ,

Mailing Address 1808 W HILLS AVE

City
TAMPA

State
FL

Zip Code
33606-3225

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HCI GROUP INC.

Occupation (for Individual)
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

03 / 31 / 2026

Transaction ID : A1338E65AC3064931947

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

10000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 14
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIGHT THE WAY FUND

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

A. GRAMMIG, ROBERT JAMES, , ,

Mailing Address 21 BAHAMA CIR

City
TAMPA

State
FL

Zip Code
33606

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOLLAND

Occupation (for Individual)
LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2026

Transaction ID : AF61912BC5723423AB9B

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

B. HILGER, PETE, , ,

Mailing Address 350 MONON BLVD
APT 530

City
CARMEL

State
IN

Zip Code
46032

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ALLIED SOLUTIONS

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2026

Transaction ID : AE533EE4A96684810AD0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

C. JOHNSON, CAMERON, , ,

Mailing Address PO BOX 8305

City
ROANOKE

State
VA

Zip Code
24014

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MAGIC CITY AUTO GROUP

Occupation (for Individual)
CAR DEALER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2026

Transaction ID : A6001A3DA8F6344D9BA8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

6000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 14
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIGHT THE WAY FUND

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

A. KOWALSKI, EDWARD, , ,

Mailing Address 5396 GULF BLVD UNIT 108

City
ST PETE BEACHState
FLZip Code
33706-2301FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2026

Transaction ID : AA717AE76A9994AACAF8

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. PERMUY, MITCH, , ,Mailing Address 400 BEACH DRIVE NE
2901

City

SAINT PETERSBURG

State
FLZip Code
33701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
POWER DESIGN, INCOccupation (for Individual)
CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2026

Transaction ID : AC4DE9ED3B3164665A37

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

C. POWELL, DANIEL, , ,

Mailing Address 4620 W BEACH PARK DR

City

TAMPA

State
FLZip Code
33609FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GENESCOOccupation (for Individual)
INSTRUCTIONAL DESIGNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2026

Transaction ID : AF070624F96B34A788EE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

3750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 14
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIGHT THE WAY FUND

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

A. PUNZONE, PAUL, , ,

Mailing Address 6023 N LYNN AVE

City
TAMPAState
FLZip Code
33604FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HOLLAND & KNIGHTOccupation (for Individual)
LITIGATION ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2026

Transaction ID : A3C51D428813F4F5E886

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. ROSENTHAL, BRUCE, , ,

Mailing Address 1250 JUNGLE AVE N

City

ST PETERSBURG

State

FL

Zip Code

33710

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERICA FIRST NATURAL RESOURCES, LLCOccupation (for Individual)
MANAGING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2026

Transaction ID : A908A7651FF994FC7A4D

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

C. SLOSSBERG, DAVID, , ,

Mailing Address 845 THIRD AVE SOUTH

City

TIERRA VERDE

State

FL

Zip Code

33715

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIREDOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2026

Transaction ID : A596D2BE55B0F441883F

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

3500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 14
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIGHT THE WAY FUND

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

A. SPRINCEANA, DRAGOS, , ,

Mailing Address 17686 CIRCLE POND CT

City
BOCA RATONState
FLZip Code
33496FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITED STRATEGIES OF AMERICAOccupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 23 / 2026

Transaction ID : ADE7A24EB87614B21A28

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

2500.00

28750.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 14

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

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NAME OF COMMITTEE (In Full)

LIGHT THE WAY FUND

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3723 GREENVILLE AVE
STE 41002

City
DALLAS

State
TX

Zip Code
75206-5311

Purpose of Disbursement

CREDIT CARD FEES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 28 / 2026

FEC Identification Number

C Transaction ID : B4CCF57ED9

Amount of Each Disbursement this Period

260.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 3723 GREENVILLE AVE
STE 41002

City
DALLAS

State
TX

Zip Code
75206-5311

Purpose of Disbursement

CREDIT CARD FEES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 19 / 2026

FEC Identification Number

C Transaction ID : B4F4B2A14B

Amount of Each Disbursement this Period

140.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 3723 GREENVILLE AVE
STE 41002

City
DALLAS

State
TX

Zip Code
75206-5311

Purpose of Disbursement

CREDIT CARD FEES

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 23 / 2026

FEC Identification Number

C Transaction ID : BFA6E3CF03

Amount of Each Disbursement this Period

181.20

☐ Memo Item

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

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

582.70

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 14

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

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NAME OF COMMITTEE (In Full)

LIGHT THE WAY FUND

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 3723 GREENVILLE AVE
STE 41002

City
DALLAS

State
TX

Zip Code
75206-5311

Purpose of Disbursement

CREDIT CARD 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 Y Y
03 / 31 / 2026

FEC Identification Number

C

Transaction ID : B8D2BCEF32

Amount of Each Disbursement this Period

221.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GONZALEZ, ELIECER, , ,

Mailing Address 6607 N DALE MABRY HWY

City
TAMPA

State
FL

Zip Code
33614-3985

Purpose of Disbursement

IN-KIND:EVENT, FOOD, CATERING, STAFF, DECORATIONS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify)

State:

District:

ANNUAL

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2026

FEC Identification Number

C

Transaction ID : B11DC5185D

Amount of Each Disbursement this Period

6000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SDP

Mailing Address PO BOX 183

City
HUDSON

State
WI

Zip Code
54016-0183

Purpose of Disbursement

ACCOUNTING CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

001
Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : B4B3F96674

Amount of Each Disbursement this Period

300.00

☐ Memo Item

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

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

6521.20

7103.90

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

PAGE 14 OF 14

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

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NAME OF COMMITTEE (In Full)

LIGHT THE WAY FUND

Full Name (Last, First, Middle Initial)

A. ANNA PAULINA LUNA FOR CONGRESSMailing Address 1201 GANDY BLVD N
P.O. BOX 23064City
SAINT PETERSBURGState
FLZip Code
33742-8000

Purpose of Disbursement

TRANSFER TO AUTHORIZED COMMITTEE

Candidate Name

PAULINA LUNA, ANNA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 13

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	2	6		

FEC Identification Number

C C00718239**Transaction ID : B9A26CB6CC**

Amount of Each Disbursement this Period

6933.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CATALINA LAUF FOR CONGRESS

Mailing Address PO BOX 366247

City
BONITA SPRINGSState
FLZip Code
34136-6247

Purpose of Disbursement

TRANSFER TO AUTHORIZED COMMITTEE

Candidate Name

LAUF, CATALINA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 19

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	1			2	0	2	6		

FEC Identification Number

C C00921783**Transaction ID : B4081DDC3D**

Amount of Each Disbursement this Period

6933.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

13867.30

13867.30