

**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

Victoria Doyle for Congress

ADDRESS (number and street)

920 North Golfview Road

Check if different
than previously
reported. (ACC)

Lake Worth Beach

FL

33460

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00904953

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

22

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 / D D / Y Y Y Y
10 / 01 / 2025

through

M M / D D / Y Y Y Y
12 / 31 / 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

Doyle, Victoria, , ,

Signature of Treasurer

Doyle, Victoria, , ,

Date

M M / D D / Y Y Y Y
07 / 13 / 2026

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Victoria Doyle for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

	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))....	5830.46	36656.46
(b) Total Contribution Refunds (from Line 20(d))	300.00	300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5530.46	36356.46
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	44385.44	72301.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	1071.91	1106.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	43313.53	71194.47
8. Cash on Hand at Close of Reporting Period (from Line 27).....	25181.99	
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)	93601.56	

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

Victoria Doyle for Congress

Report Covering the Period:

From:

MM / DD / YYYY
10 / 01 / 2025

To:

MM / DD / YYYY
12 / 31 / 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).....

3200.00

27450.00

(ii) Unitemized

2630.46

9106.46

(iii) TOTAL of contributions
from individuals ▶

5830.46

36556.46

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

100.00

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

5830.46

36656.46

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

50000.00

60020.00

(b) All Other Loans.....

0.00

0.00

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

50000.00

60020.00

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

1071.91

1106.91

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)..... ▶

56902.37

97783.37

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.....	44385.44	72301.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	300.00	300.00
(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)).....	300.00	300.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	44685.44	72601.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	12965.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	56902.37
25. SUBTOTAL (add Line 23 and Line 24).....	69867.43
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	44685.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	25181.99

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 65

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 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)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Cohen, Beth, , ,

A. Mailing Address 17105 Whitehaven Drive

City

Boca Raton

State

FL

Zip Code

33496

FEC ID number of contributing
federal political committee.

C

Name of Employer

Not employed

Occupation

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
10 27 2025

Transaction ID : A-485

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmark via ActBlue on 2025-11-02

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

ActBlue

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

31468.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 02 2025

Transaction ID : A-485CM

Amount of Each Receipt this Period

1540.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

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

Coles, Robert, , ,

Mailing Address 201 Lands End Rd

City

Morehead City

State

NC

Zip Code

28557

FEC ID number of contributing
federal political committee.

C

Name of Employer

EmergeOrtho

Occupation

Md

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
10 04 2025

Transaction ID : A-315

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmark via ActBlue on 2025-10-05

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

1250.00

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

ActBlue

A.

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

29575.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 05 2025

Transaction ID : A-315CM

Amount of Each Receipt this Period

1199.00



Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

B.

Full Name (Last, First, Middle Initial)

Doyle, Jessica, , ,

Mailing Address 146 Washington Ave

City

Brooklyn

State

NY

Zip Code

11205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Not Employed

Not Employed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

209.00

Date of Receipt

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

Transaction ID : A-438

Amount of Each Receipt this Period

50.00



Memo Item

Earmark via ActBlue on 2025-10-12

C.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

29725.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 12 2025

Transaction ID : A-438CM

Amount of Each Receipt this Period

150.00



Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

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

50.00

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)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Doyle, Jessica, , ,

A. Mailing Address 146 Washington Ave

City
Brooklyn

State
NY

Zip Code
11205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 10 2025

Transaction ID : A-580

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmark via ActBlue on 2025-11-16

Full Name (Last, First, Middle Initial)

ActBlue

B. Mailing Address PO Box 441146

City
Somerville

State
MA

Zip Code
02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

32728.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 16 2025

Transaction ID : A-580CM

Amount of Each Receipt this Period

200.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

Full Name (Last, First, Middle Initial)

Doyle, Jessica, , ,

C. Mailing Address 146 Washington Ave

City
Brooklyn

State
NY

Zip Code
11205

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation
Not Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

309.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 10 2025

Transaction ID : A-641

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmark via ActBlue on 2025-12-14

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

100.00

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)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

ActBlue

A.

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

33522.46

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 14 2025

Transaction ID : A-641CM

Amount of Each Receipt this Period

266.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

Full Name (Last, First, Middle Initial)

Huntington, Chris, , ,

B.

Mailing Address 34 Fuller Place

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Encap development

Renewable energy project developer

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
10 03 2025

Transaction ID : A-322

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmark via ActBlue on 2025-10-05

Full Name (Last, First, Middle Initial)

ActBlue

C.

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

29575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 05 2025

Transaction ID : A-322CM

Amount of Each Receipt this Period

1199.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

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

50.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Huntington, Chris, , ,

A.

Mailing Address 34 Fuller Place

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Encap development

Occupation
Renewable energy project developer

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 Y
11 03 2025

Transaction ID : A-544

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmark via ActBlue on 2025-11-09

Full Name (Last, First, Middle Initial)

ActBlue

B.

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

32528.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 09 2025

Transaction ID : A-544CM

Amount of Each Receipt this Period

1060.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

Full Name (Last, First, Middle Initial)

Huntington, Chris, , ,

C.

Mailing Address 34 Fuller Place

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Encap development

Occupation
Renewable energy project developer

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
12 03 2025

Transaction ID : A-635

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmark via ActBlue on 2025-12-07

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

100.00

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

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)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

ActBlue

A.

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

33256.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	2	5

Transaction ID : A-635CM

Amount of Each Receipt this Period

60.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

B.

Full Name (Last, First, Middle Initial)

Le Fort, Mary Ann, , ,

Mailing Address 42 Steep Hill Road

City

Weston

State

CT

Zip Code

06883-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Priceline

Lawyer

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A-437

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmark via ActBlue on 2025-10-12

C.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

29725.00

Date of Receipt

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

Transaction ID : A-437CM

Amount of Each Receipt this Period

150.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

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

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

1	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Le Fort, Mary Ann, , ,

A.

Mailing Address 42 Steep Hill Road

City

Weston

State

CT

Zip Code

06883-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Priceline

Occupation

Lawyer

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
11 10 2025

Transaction ID : A-579

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmark via ActBlue on 2025-11-16

Full Name (Last, First, Middle Initial)

ActBlue

B.

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

32728.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 16 2025

Transaction ID : A-579CM

Amount of Each Receipt this Period

200.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

Full Name (Last, First, Middle Initial)

Le Fort, Mary Ann, , ,

C.

Mailing Address 42 Steep Hill Road

City

Weston

State

CT

Zip Code

06883-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Priceline

Occupation

Lawyer

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 08 2025

Transaction ID : A-637

Amount of Each Receipt this Period

100.00

☐ Memo Item

Earmark via ActBlue on 2025-12-14

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 12 OF 65

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

ActBlue

A.

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

33522.46

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12		14		2025

Transaction ID : A-637CM

Amount of Each Receipt this Period

266.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

B.

Full Name (Last, First, Middle Initial)

Osman, Mariam, , ,

Mailing Address 401 East 65 Street

City

Manhattan

State

NY

Zip Code

10065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

BlackRock

Operations

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
11		06		2025

Transaction ID : A-545

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Earmark via ActBlue on 2025-11-09

C.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

32528.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
11		09		2025

Transaction ID : A-545CM

Amount of Each Receipt this Period

1060.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

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

1000.00

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 13 OF 65

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Schneider, Tob, , ,

A.

Mailing Address 1636 Pintail Way

City

Sarasota

State

FL

Zip Code

34231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	2	5

Transaction ID : A-817

Amount of Each Receipt this Period

250.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Young, Beverly, , ,

Mailing Address 13610 SE 37th St.

City

Vancouver

State

WA

Zip Code

98683

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A-318

Amount of Each Receipt this Period

50.00



Memo Item

Earmark via ActBlue on 2025-10-05

C.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

29575.00

Date of Receipt

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

Transaction ID : A-318CM

Amount of Each Receipt this Period

1199.00



Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

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

300.00

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)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Young, Beverly, , ,

A.

Mailing Address 13610 SE 37th St.

City

Vancouver

State

WA

Zip Code

98683

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 02 2025

Transaction ID : A-494

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmark via ActBlue on 2025-11-02

Full Name (Last, First, Middle Initial)

ActBlue

B.

Mailing Address PO Box 441146

City

Somerville

State

MA

Zip Code

02144

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

31468.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 02 2025

Transaction ID : A-494CM

Amount of Each Receipt this Period

1540.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

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)..... ▶

50.00

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

3200.00

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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☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

A.

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C H6FL22107

Name of Employer

Doyle for Congress

Occupation
candidate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

35120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 12 2025

Transaction ID : A-457

Amount of Each Receipt this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Doyle, Victoria, , ,

B.

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

FEC ID number of contributing
federal political committee.

C H6FL22107

Name of Employer

Doyle for Congress

Occupation
candidate

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

60120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 29 2025

Transaction ID : A-675

Amount of Each Receipt this Period

25000.00

☐ 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)..... ▶

50000.00

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

50000.00

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 16 OF 65

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)
Apple

A. Mailing Address 1 Apple Park Way

City
Cupertino

State
FL

Zip Code
95014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

243.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2025

Transaction ID : A-431

Amount of Each Receipt this Period

23.99

☐ Memo Item
software

Full Name (Last, First, Middle Initial)
SendX by SendWorks

B. Mailing Address 1580 Logan Street
#660 PMB 591

City
Denver

State
CO

Zip Code
80203

FEC 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 Y
12 02 2025

Transaction ID : A-633

Amount of Each Receipt this Period

899.99

☐ Memo Item
text messaging

Full Name (Last, First, Middle Initial)
Squarespace

C. Mailing Address 225 Varick Street

City
New York

State
NY

Zip Code
10014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

712.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 27 2025

Transaction ID : A-827

Amount of Each Receipt this Period

147.93

☐ Memo Item
Website Hosting

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

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

1071.91

1071.91

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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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

47.38

Transaction ID : B-323

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.93

Transaction ID : B-439

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6.84

Transaction ID : B-445

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

60.15

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.19

Transaction ID : B-450

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

61.09

Transaction ID : B-541

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

41.88

Transaction ID : B-547

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

104.16

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7.91

Transaction ID : B-726

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.32

Transaction ID : B-728

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

8.28

Transaction ID : B-731

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

26.51

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees.

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		07		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

2.38

Transaction ID : B-733

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

- 0.90

Transaction ID : B-737

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

7.77

Transaction ID : B-740

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

9.25

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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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.76

Transaction ID : B-743

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue Technical Services

Mailing Address P.O. Box 441146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
credit card processing fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

0.40

Transaction ID : B-746

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

28.53

Transaction ID : B-426

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

29.69

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.99

Transaction ID : B-427

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.99

Transaction ID : B-428

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : B-429

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

35.97

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : B-766

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

28.53

Transaction ID : B-773

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.99

Transaction ID : B-764

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

40.51

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : B-767

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.99

Transaction ID : B-768

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Apple

Mailing Address 1 Apple Park Way

City
CupertinoState
FLZip Code
95014Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

28.53

Transaction ID : B-774

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

48.51

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Apple

Mailing Address 1 Apple Park Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		18		2025

City
CupertinoState
FLZip Code
95014

FEC Identification Number

C

Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1.99

Transaction ID : B-763

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Apple

Mailing Address 1 Apple Park Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		22		2025

City
CupertinoState
FLZip Code
95014

FEC Identification Number

C

Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

9.99

Transaction ID : B-769

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Apple

Mailing Address 1 Apple Park Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		24		2025

City
CupertinoState
FLZip Code
95014

FEC Identification Number

C

Purpose of Disbursement
software

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

9.99

Transaction ID : B-844

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

21.97

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

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Computare.PartnersMailing Address 701 South Howard Avenue
#106-813City
TampaState
FLZip Code
33606Purpose of Disbursement
Compliance & Accounting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : B-418

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Computare.PartnersMailing Address 701 South Howard Avenue
#106-813City
TampaState
FLZip Code
33606Purpose of Disbursement
Compliance & Accounting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : B-452

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Computare.PartnersMailing Address 701 South Howard Avenue
#106-813City
TampaState
FLZip Code
33606Purpose of Disbursement
Data Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6157.00

Transaction ID : B-572

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

10657.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Computare.PartnersMailing Address 701 South Howard Avenue
#106-813City
TampaState
FLZip Code
33606Purpose of Disbursement
Compliance & Accounting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : B-629

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 525 20th Street

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
payroll - net pay

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1048.63

Transaction ID : B-549

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gusto

Mailing Address 525 20th Street

City
San FranciscoState
CAZip Code
94107Purpose of Disbursement
payroll taxes

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

216.22

Transaction ID : B-553

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

3514.85

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Gusto

Mailing Address 525 20th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City
San FranciscoState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
payroll - net pay

001

Amount of Each Disbursement this Period

805.75

Transaction ID : B-559

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 525 20th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City
San FranciscoState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
payroll taxes

001

Amount of Each Disbursement this Period

217.76

Transaction ID : B-563

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Gusto

Mailing Address 525 20th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2025

City
San FranciscoState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
payroll - net pay

001

Amount of Each Disbursement this Period

474.46

Transaction ID : B-612

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1497.97

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 29 OF 65

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Gusto

Mailing Address 525 20th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2025

City
San FranciscoState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
payroll taxes

001

Amount of Each Disbursement this Period

95.54

Transaction ID : B-616

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 525 20th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2025

City
San FranciscoState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
payroll processing

001

Amount of Each Disbursement this Period

91.00

Transaction ID : B-776

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Gusto

Mailing Address 525 20th Street

Date of Disbursement

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

City
San FranciscoState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
payroll - net pay

001

Amount of Each Disbursement this Period

706.47

Transaction ID : B-778

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

893.01

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Gusto

Mailing Address 525 20th Street

Date of Disbursement

M M	D D	Y Y Y Y
12	12	2025

City
San FranciscoState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
payroll taxes

001

Amount of Each Disbursement this Period

142.31

Transaction ID : B-783

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Gusto

Mailing Address 525 20th Street

Date of Disbursement

M M	D D	Y Y Y Y
12	31	2025

City
San FranciscoState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
payroll - net pay

001

Amount of Each Disbursement this Period

103.89

Transaction ID : B-665

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Gusto

Mailing Address 525 20th Street

Date of Disbursement

M M	D D	Y Y Y Y
12	31	2025

City
San FranciscoState
CAZip Code
94107

FEC Identification Number

C

Purpose of Disbursement
payroll taxes

001

Amount of Each Disbursement this Period

20.94

Transaction ID : B-669

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

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

267.14

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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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Howley's Restaurant

Mailing Address 4700 S Dixie Hwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		10		2025

City
West Palm BeachState
FLZip Code
33405

FEC Identification Number

C

Purpose of Disbursement
meeting meal

001

Amount of Each Disbursement this Period

123.90

Transaction ID : B-835

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Lupion, Shavonne, , ,Mailing Address 1112 Lake Terrace
Apt 203B

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2025

City
Boynton BeachState
FLZip Code
33426

FEC Identification Number

C

Purpose of Disbursement
net payroll

001

Amount of Each Disbursement this Period

311.68

Transaction ID : B-550

☒ Memo Item MEMO: Subvendor of-Gusto

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Lupion, Shavonne, , ,Mailing Address 1112 Lake Terrace
Apt 203B

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City
Boynton BeachState
FLZip Code
33426

FEC Identification Number

C

Purpose of Disbursement
net payroll

001

Amount of Each Disbursement this Period

27.70

Transaction ID : B-560

☒ Memo Item MEMO: Subvendor of-Gusto

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

123.90

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

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

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Lupion, Shavonne, , ,Mailing Address 1112 Lake Terrace
Apt 203BCity
Boynton BeachState
FLZip Code
33426Purpose of Disbursement
net payroll

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

103.90

Transaction ID : B-613

☒ Memo Item MEMO: Subvendor of-Gusto

Full Name (Last, First, Middle Initial)

B. Lupion, Shavonne, , ,Mailing Address 1112 Lake Terrace
Apt 203BCity
Boynton BeachState
FLZip Code
33426Purpose of Disbursement
net payroll

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

121.21

Transaction ID : B-780

☒ Memo Item MEMO: Subvendor of-Gusto

Full Name (Last, First, Middle Initial)

C. Lupion, Shavonne, , ,Mailing Address 1112 Lake Terrace
Apt 203BCity
Boynton BeachState
FLZip Code
33426Purpose of Disbursement
net payroll

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

27.70

Transaction ID : B-666

☒ Memo Item MEMO: Subvendor of-Gusto**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
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Nature Coast Strategies

Mailing Address 6188 West Pine Circle

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	2	5

City
Crystal RiverState
FLZip Code
34429

FEC Identification Number

C

Purpose of Disbursement
campaign staff

001

Amount of Each Disbursement this Period

500.00

Transaction ID : B-569

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Nature Coast Strategies

Mailing Address 6188 West Pine Circle

Date of Disbursement

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

City
Crystal RiverState
FLZip Code
34429

FEC Identification Number

C

Purpose of Disbursement
campaign staff

001

Amount of Each Disbursement this Period

500.00

Transaction ID : B-596

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Panda Designs and Marketing

Mailing Address 2632 Bullion Loop

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	2	5

City
SanfordState
FLZip Code
32771

FEC Identification Number

C

Purpose of Disbursement
Website design

001

Amount of Each Disbursement this Period

283.30

Transaction ID : B-841

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

1283.30

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Panda Designs and Marketing

Mailing Address 2632 Bullion Loop

City
SanfordState
FLZip Code
32771Purpose of Disbursement
Website design

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B-574

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Panda Designs and Marketing

Mailing Address 2632 Bullion Loop

City
SanfordState
FLZip Code
32771Purpose of Disbursement
palm cards

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1737.43

Transaction ID : B-575

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Philip Katz

Mailing Address 810 N. Golfview

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
Political consutling

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B-434

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

7487.43

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Philip Katz

Mailing Address 810 N. Golfview

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		01		2025

City
Lake Worth BeachState
FLZip Code
33460

FEC Identification Number

C

Purpose of Disbursement
Political consulting

001

Amount of Each Disbursement this Period

5000.00

Transaction ID : B-628

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Rojas, May, , ,

Mailing Address 65 Cedar Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2025

City
Boynton BeachState
FLZip Code
33436

FEC Identification Number

C

Purpose of Disbursement
net payroll

001

Amount of Each Disbursement this Period

436.35

Transaction ID : B-551

☒ Memo Item MEMO: Subvendor of-Gusto

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Rojas, May, , ,

Mailing Address 65 Cedar Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2025

City
Boynton BeachState
FLZip Code
33436

FEC Identification Number

C

Purpose of Disbursement
net payroll

001

Amount of Each Disbursement this Period

141.99

Transaction ID : B-561

☒ Memo Item MEMO: Subvendor of-Gusto

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

5000.00

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Rojas, May, , ,

Mailing Address 65 Cedar Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2025

City
Boynton BeachState
FLZip Code
33436

FEC Identification Number

C

Purpose of Disbursement
net payroll

001

Amount of Each Disbursement this Period

200.87

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Transaction ID : B-614

☒ Memo Item MEMO: Subvendor of-Gusto

State:

District:

Full Name (Last, First, Middle Initial)

B. Rojas, May, , ,

Mailing Address 65 Cedar Ln

Date of Disbursement

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

City
Boynton BeachState
FLZip Code
33436

FEC Identification Number

C

Purpose of Disbursement
net payroll

001

Amount of Each Disbursement this Period

398.25

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Transaction ID : B-779

☒ Memo Item MEMO: Subvendor of-Gusto

State:

District:

Full Name (Last, First, Middle Initial)

C. Rojas, May, , ,

Mailing Address 65 Cedar Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

City
Boynton BeachState
FLZip Code
33436

FEC Identification Number

C

Purpose of Disbursement
net payroll

001

Amount of Each Disbursement this Period

41.56

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

Transaction ID : B-667

☒ Memo Item MEMO: Subvendor of-Gusto

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
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Ryzy-Ryski, Sophia, , ,

Mailing Address 815 North Palmway

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
campaign staff

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B-462

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ryzy-Ryski, Sophia, , ,

Mailing Address 815 North Palmway

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
campaign staff

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B-571

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ryzy-Ryski, Sophia, , ,

Mailing Address 815 North Palmway

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
campaign staff

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : B-608

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

700.00

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

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

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Rzyz-Ryski, Sophia, , ,

Mailing Address 815 North Palmway

City
Lake Worth BeachState
FLZip Code
33460Purpose of Disbursement
campaign staff

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

625.00

Transaction ID : B-638

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Scale to WinMailing Address 455 Market Street
Suite 1940 - PMB 546116City
San FranciscoState
CAZip Code
94105Purpose of Disbursement
texting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

490.00

Transaction ID : B-634

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SendX by SendWorksMailing Address 1580 Logan Street
#660 PMB 591City
DenverState
COZip Code
80203Purpose of Disbursement
text messaging

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

899.99

Transaction ID : B-461

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

2014.99

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Social Security Administration

Mailing Address 6401 Security Boulevard

Date of Disbursement

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

City
BaltimoreState
MDZip Code
21235

FEC Identification Number

C

Purpose of Disbursement
social security taxes

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

114.38

Transaction ID : B-567

☒ Memo Item MEMO: Subvendor of-Gusto

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Social Security Administration

Mailing Address 6401 Security Boulevard

Date of Disbursement

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

City
BaltimoreState
MDZip Code
21235

FEC Identification Number

C

Purpose of Disbursement
social security taxes

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

63.70

Transaction ID : B-618

☒ Memo Item MEMO: Subvendor of-Gusto

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Social Security Administration

Mailing Address 6401 Security Boulevard

Date of Disbursement

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

City
BaltimoreState
MDZip Code
21235

FEC Identification Number

C

Purpose of Disbursement
social security taxes

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

94.86

Transaction ID : B-785

☒ Memo Item MEMO: Subvendor of-Gusto

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	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:
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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Social Security Administration

Mailing Address 6401 Security Boulevard

City
BaltimoreState
MDZip Code
21235Purpose of Disbursement
social security taxes

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.96

Transaction ID : B-671

☒ Memo Item MEMO: Subvendor of-Gusto

Full Name (Last, First, Middle Initial)

B. Spady Cultural Heritage Museum

Mailing Address 170 Northwest 5th Avenue

City
Delray BeachState
FLZip Code
33444Purpose of Disbursement
event sponsorship

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

550.00

Transaction ID : B-842

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
email

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

168.00

Transaction ID : B-420

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

718.00

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
email

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

168.00

Transaction ID : B-421

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
website

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

36.00

Transaction ID : B-419

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
Website Hosting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

204.88

Transaction ID : B-424

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

408.88

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
website

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

36.00

Transaction ID : B-818

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
Website Hosting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

243.03

Transaction ID : B-463

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
email hosting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

243.03

Transaction ID : B-464

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

522.06

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
domain

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

9.00

Transaction ID : B-825

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
Domain

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.00

Transaction ID : B-824

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
email hosting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

73.00

Transaction ID : B-823

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

91.00

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
Website Hosting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

235.79

Transaction ID : B-826

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
website

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

36.00

Transaction ID : B-819

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
email hosting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

73.00

Transaction ID : B-822

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

344.79

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Squarespace

Mailing Address 225 Varick Street

City
New YorkState
NYZip Code
10014Purpose of Disbursement
website

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

36.00

Transaction ID : B-821

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Switchboard Public Benefit Corporation

Mailing Address PO Box 33485

City
WashingtonState
DCZip Code
20033Purpose of Disbursement
text messaging

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2385.74

Transaction ID : B-456

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Switchboard Public Benefit Corporation

Mailing Address PO Box 33485

City
WashingtonState
DCZip Code
20033Purpose of Disbursement
text messaging

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

745.17

Transaction ID : B-828

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

3166.91

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. TD Bank

Mailing Address 130 N Dixie Hwy

Date of Disbursement

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

City
Lake WorthState
FLZip Code
33460

FEC Identification Number

C

Purpose of Disbursement
bank fees

001

Amount of Each Disbursement this Period

10.00

Transaction ID : B-803

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. TD Bank

Mailing Address 130 N Dixie Hwy

Date of Disbursement

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

City
Lake WorthState
FLZip Code
33460

FEC Identification Number

C

Purpose of Disbursement
bank fees

001

Amount of Each Disbursement this Period

20.00

Transaction ID : B-808

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. TD Bank

Mailing Address 130 N Dixie Hwy

Date of Disbursement

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

City
Lake WorthState
FLZip Code
33460

FEC Identification Number

C

Purpose of Disbursement
bank fees

001

Amount of Each Disbursement this Period

30.00

Transaction ID : B-812

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

60.00

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. TD Bank

Mailing Address 130 N Dixie Hwy

City
Lake WorthState
FLZip Code
33460Purpose of Disbursement
bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : B-804

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TD Bank

Mailing Address 130 N Dixie Hwy

City
Lake WorthState
FLZip Code
33460Purpose of Disbursement
bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : B-805

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TD Bank

Mailing Address 130 N Dixie Hwy

City
Lake WorthState
FLZip Code
33460Purpose of Disbursement
bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B-809

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

40.00

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

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

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. VistaPrint

Mailing Address 275 Wyman Street

City
WalthamState
MAZip Code
02451Purpose of Disbursement
printing

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

361.00

Transaction ID : B-837

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VistaPrint

Mailing Address 275 Wyman Street

City
WalthamState
MAZip Code
02451Purpose of Disbursement
printing

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

377.03

Transaction ID : B-838

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Weil, Joshua, Joseph, ,

Mailing Address 8381 Citrus Chase Dr

City
OrlandoState
FLZip Code
32836Purpose of Disbursement
fundraising consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B-573

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

1738.03

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Weil, Joshua, Joseph, ,

Mailing Address 8381 Citrus Chase Dr

City
OrlandoState
FLZip Code
32836Purpose of Disbursement
fundraising consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B-611

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Weil, Joshua, Joseph, ,

Mailing Address 8381 Citrus Chase Dr

City
OrlandoState
FLZip Code
32836Purpose of Disbursement
fundraising consulting

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B-631

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Young, Rhiannon, , ,Mailing Address 10000 Saint Georges Road
Apt 201ACity
Ormond BeachState
FLZip Code
32174Purpose of Disbursement
net payroll

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

300.60

Transaction ID : B-552

☒ Memo Item MEMO: Subvendor of-Gusto**SUBTOTAL** of Disbursements This Page (optional).....▶

2000.00

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Young, Rhiannon, , ,Mailing Address 10000 Saint Georges Road
Apt 201ACity
Ormond BeachState
FLZip Code
32174Purpose of Disbursement
net payroll

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

636.06

Transaction ID : B-562

☒ Memo Item MEMO: Subvendor of-Gusto

Full Name (Last, First, Middle Initial)

B. Young, Rhiannon, , ,Mailing Address 10000 Saint Georges Road
Apt 201ACity
Ormond BeachState
FLZip Code
32174Purpose of Disbursement
net payroll

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

169.69

Transaction ID : B-615

☒ Memo Item MEMO: Subvendor of-Gusto

Full Name (Last, First, Middle Initial)

C. Young, Rhiannon, , ,Mailing Address 10000 Saint Georges Road
Apt 201ACity
Ormond BeachState
FLZip Code
32174Purpose of Disbursement
net payroll

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.78

Transaction ID : B-782

☒ Memo Item MEMO: Subvendor of-Gusto**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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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Young, Rhiannon, , ,Mailing Address 10000 Saint Georges Road
Apt 201ACity
Ormond BeachState
FLZip Code
32174Purpose of Disbursement
net payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2025

FEC Identification Number

C

Amount of Each Disbursement this Period

34.63

Transaction ID : B-668

☒ Memo Item MEMO: Subvendor of-Gusto

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

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

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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

0.00

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

42905.98

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Young, Beverly, , ,

Mailing Address 13610 SE 37th St.

City
VancouverState
WAZip Code
98683Purpose of Disbursement
refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B-621

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Young, Beverly, , ,

Mailing Address 13610 SE 37th St.

City
VancouverState
WAZip Code
98683Purpose of Disbursement
refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B-622

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Young, Beverly, , ,

Mailing Address 13610 SE 37th St.

City
VancouverState
WAZip Code
98683Purpose of Disbursement
refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B-623

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

150.00

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

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NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

Full Name (Last, First, Middle Initial)

A. Young, Beverly, , ,

Mailing Address 13610 SE 37th St.

City
VancouverState
WAZip Code
98683Purpose of Disbursement
refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B-624

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Young, Beverly, , ,

Mailing Address 13610 SE 37th St.

City
VancouverState
WAZip Code
98683Purpose of Disbursement
refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B-625

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Young, Beverly, , ,

Mailing Address 13610 SE 37th St.

City
VancouverState
WAZip Code
98683Purpose of Disbursement
refunded contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☒	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B-626

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

150.00

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

300.00

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 54 OF 65

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-19

Victoria Doyle for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Doyle, Victoria, , ,

Mailing Address

920 N Golfview Rd

City

Lake Worth

State

FL

ZIP Code

33460

☒ Personal Funds of the Candidate

Original Amount of Loan

20.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

12/31/2026

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

20.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 55 OF 65

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-333

Victoria Doyle for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Doyle, Victoria, , ,

Mailing Address

920 N Golfview Rd

City

Lake Worth

State

FL

ZIP Code

33460

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 / 22 / 2025M M / D D / Y Y Y Y
/ / 2026M M / D D / Y Y Y Y
12/31/2026

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 56 OF 65

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-457

Victoria Doyle for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Doyle, Victoria, , ,

Mailing Address

920 N Golfview Rd

City

Lake Worth

State

FL

ZIP Code

33460

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
11 12 / 2025M M / D D / Y Y Y Y
12/31/2026

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

25000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 57 OF 65

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C-675

Victoria Doyle for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Doyle, Victoria, , ,

Mailing Address

920 N Golfview Rd

City

Lake Worth

State

FL

ZIP Code

33460

☒ Personal Funds of the Candidate

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 / 29 / 2025M M / D D / Y Y Y Y
12/31/2026

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

25000.00

TOTALS This Period (last page in this line only).....▶

60020.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 58 OF 65

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

website

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

44.15

Transaction ID : D-20

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

44.15

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

social media

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

45.29

Transaction ID : D-22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

45.29

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

website

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

168.00

Transaction ID : D-26

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

168.00

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

257.44

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 59 OF 65

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

political consulting

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

5000.00

Transaction ID : D-42

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

website

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

432.00

Transaction ID : D-36

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

432.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

fundraising consulting

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

1500.00

Transaction ID : D-38

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

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

6932.00

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 60 OF 65

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

photography

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

250.00

Transaction ID : D-30

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

photography

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

300.00

Transaction ID : D-34

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

300.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

graphic design

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

133.20

Transaction ID : D-24

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

133.20

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

683.20

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

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

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

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

PAGE 61 OF 65

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

NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

photography

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

180.00

Transaction ID : D-28

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

180.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

travel

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

281.37

Transaction ID : D-32

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

281.37

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

polling

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

4000.00

Transaction ID : D-40

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

4461.37

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 62 OF 65

FOR LINE NUMBER:
(check only one)

☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

research

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-413

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

printing

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

113.00

Transaction ID : D-411

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

113.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

political consulting

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

4000.00

Transaction ID : D-409

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4000.00

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

6113.00

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

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

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

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

PAGE 63 OF 65

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

NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

fundraising consulting

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

5000.00

Transaction ID : D-398

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

printing

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-407

Amount Incurred This Period

267.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

267.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

fundraising consulting

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-405

Amount Incurred This Period

400.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

1) **SUBTOTALS** This Period This Page (optional) ▶

5667.00

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

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

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

NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

fundraising consulting and data

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

5000.00

Transaction ID : D-403

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

fundraising consulting and printing

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

2467.55

Transaction ID : D-400

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2467.55

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

fundraising consulting

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-454

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

8467.55

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

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

PAGE 65 OF 65

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

NAME OF COMMITTEE (In Full)

Victoria Doyle for Congress

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

Doyle, Victoria, , ,

Nature of Debt (Purpose):

fundraising consulting

Mailing Address 920 N Golfview Rd

City

Lake Worth

State

FL

Zip Code

33460

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-459

Amount Incurred This Period

1000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

1000.00

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

33581.56

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

60020.00

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

93601.56