

**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.

1 2 F E 4 M 5

BURCHETT FOR CONGRESS

ADDRESS (number and street)

PO BOX 51345

Check if different
than previously
reported. (ACC)

KNOXVILLE

TN

37950

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00652149

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

TN

02

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
04 / 01 / 2025

through

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

Goins, Robert, L., ,

Signature of Treasurer

Goins, Robert, L., ,

Date

M M / D D / Y Y Y Y
07 / 15 / 2025

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

BURCHETT FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	65115.95	158679.75
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	65115.95	158679.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	131580.61	421795.72
(b) Total Offsets to Operating Expenditures (from Line 14).....	7.10	1278.58
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	131573.51	420517.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	593278.54	
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)	10053.68	

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

BURCHETT FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2025

To:

M M / D D / Y Y Y Y
06 / 30 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than
Political Committees****(i) Itemized (use Schedule A).....**

26201.70

61337.20

(ii) Unitemized

24414.25

78461.75

**(iii) TOTAL of contributions
from individuals**

50615.95

139798.95

(b) Political Party Committees.....

0.00

0.00

**(c) Other Political Committees
(such as PACs)**

14500.00

18880.80

(d) The Candidate

0.00

0.00

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

65115.95

158679.75

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES**

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the
Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

7.10

1278.58

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

2374.24

6350.75

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

67497.29

166309.08

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.....	131580.61	421795.72
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	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	8595.00	33845.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	140175.61	455640.72

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	665956.86
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	67497.29
25. SUBTOTAL (add Line 23 and Line 24).....	733454.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	140175.61
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	593278.54

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 99

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

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

NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Bieber, Albert, , ,

A.

Mailing Address PO Box 207

City
ChinaState
TXZip Code
77613FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 27 2025

Transaction ID : A9CD02092597A4546AC7

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Bowling, Richard, L, ,

B.

Mailing Address 2122 Island Home Blvd

City
KnoxvilleState
TNZip Code
37920FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
HR Exec.

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AEFD896185A5141B78F1

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Brownlee, Mackey, , ,

C.

Mailing Address 8421 Nubbin Ridge Rd

City
KnoxvilleState
TNZip Code
37923FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
Commercial Real Estate.

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AF097F10016BA4592B21

Amount of Each Receipt this Period

500.00

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

1100.00

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

PAGE 6 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Catsimatidis, John, A., ,

A.

Mailing Address 800 3rd Ave

FI 5

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Red Apple Group

Occupation

Chairman

Receipt For: 2026

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A266BD25855D84023BA2

Amount of Each Receipt this Period

1500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Catsimatidis, John, A., ,

Mailing Address 800 3rd Ave

FI 5

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Red Apple Group

Occupation

Chairman

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A735F1D63343E4E749CE

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Claboush, John, , ,

Mailing Address 445 Continental Dr

Maryville

City

Maryville

State

TN

Zip Code

37804

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 Y Y
04 29 2025

Transaction ID : A9AC354F115034CD894C

Amount of Each Receipt this Period

250.00

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

5250.00

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

PAGE 7 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Clayton, Richard, , ,

A.

Mailing Address 816 Andover Blvd

City

Knoxville

State

TN

Zip Code

37934

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clayton Motors Inc

Occupation

Manager

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : ACE1B252F0D894627BBC

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Collins, Cecil, , ,

B.

Mailing Address PO Box 99

City

Blaine

State

TN

Zip Code

37709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Usaf Tsgt/e-G

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

212.50

Date of Receipt

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

Transaction ID : ADB77CDE5B32548CB806

Amount of Each Receipt this Period

117.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

Collins, Cecil, , ,

C.

Mailing Address PO Box 99

City

Blaine

State

TN

Zip Code

37709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Usaf Tsgt/e-G

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

282.50

Date of Receipt

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

Transaction ID : A843C20B77FD544609BE

Amount of Each Receipt this Period

70.00

☐ Memo Item

487.50

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

De Decesare, Catherine, , ,

A.

Mailing Address 59 Linden St
Massapequa

City

Massapequa

State

NY

Zip Code

11758

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 ▼

312.00

Date of Receipt

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

Transaction ID : AD3128B86246B43BCA53

Amount of Each Receipt this Period

156.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Douglas, Steve, , ,

B.

Mailing Address 9612 Valley Woods Ln

City

Knoxville

State

TN

Zip Code

37922

FEC ID number of contributing
federal political committee.

C

Name of Employer

N Maxwell Consulting

Occupation

Sales

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

710.25

Date of Receipt

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

Transaction ID : A323385F9AE6F44EBA0C

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ettenborough, Elliot, , ,

C.

Mailing Address 839 Ethans Glen Dr

City

Knoxville

State

TN

Zip Code

37923

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 ▼

1000.00

Date of Receipt

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

Transaction ID : A248E171CEDF04E2A9E3

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1256.00

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

PAGE 9 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Friesland, Lou, , ,

A. Mailing Address 38 Allison Hollow RdCity
MarionState
NCZip Code
28752FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : A9F57E8B7CCD645148A6

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Germanaro, Setsuko, , ,

B. Mailing Address 10133 Midland Oil RdCity
GlenfordState
OHZip Code
43739FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

204.10

Date of Receipt

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

Transaction ID : A7FF034519C9E47A2A4E

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Germanaro, Setsuko, , ,

C. Mailing Address 10133 Midland Oil RdCity
GlenfordState
OHZip Code
43739FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

254.10

Date of Receipt

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

Transaction ID : AFAB10F3748F74F90B30

Amount of Each Receipt this Period

50.00

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

250.00

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

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

PAGE 10 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Germanaro, Setsuko, , ,

A.

Mailing Address 10133 Midland Oil Rd

City

Glenford

State

OH

Zip Code

43739

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 ▼

304.10

Date of Receipt

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

Transaction ID : A0F6D32B986F94DD5A5A

Amount of Each Receipt this Period

50.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Germanaro, Setsuko, , ,

Mailing Address 10133 Midland Oil Rd

City

Glenford

State

OH

Zip Code

43739

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 ▼

404.10

Date of Receipt

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

Transaction ID : A7A9D53D31C924677ADB

Amount of Each Receipt this Period

100.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Hirst, Justin, , ,

Mailing Address 2433 E 5th Ave

City

Knoxville

State

TN

Zip Code

37917

FEC ID number of contributing
federal political committee.

C

Name of Employer

Smiths Detection

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

Transaction ID : A7D07C6985519436EB69

Amount of Each Receipt this Period

500.00

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

650.00

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 11 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Hofferbert, Butch, , ,

A.Mailing Address 3120 Great Wood Way
KnoxvilleCity
KnoxvilleState
TNZip Code
37922FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
SALES

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AE90E2E80616A4F9B9D1

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hopkins, Mark, , ,

B.

Mailing Address 3043 S Robertson Rd

City
CasperState
WYZip Code
82604FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 27 2025

Transaction ID : AC72E3F425FBE4FAFB36

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Huang, Joseph, , ,

C.

Mailing Address 15 Sandalwood Dr

City
ParsippanyState
NJZip Code
07054FEC ID number of contributing
federal political committee.

C

Name of Employer
Self EmployedOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : A830B3C23A6064F3AB59

Amount of Each Receipt this Period

75.00

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

650.00

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 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Humohreys, Thomas, , ,

A.

Mailing Address 259 Creekwood Cove Ln

City

Lenoir City

State

TN

Zip Code

37772

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 ▼

225.00

Date of Receipt

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

Transaction ID : ADFFAD694406E4A18A51

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Johnson, David Joel, , ,

B.

Mailing Address 522 Gregg Ruth Way

City

Knoxville

State

TN

Zip Code

37909

FEC ID number of contributing
federal political committee.

C

Name of Employer

JPM

Occupation

Management

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : AEC5D11AB623A4C2ABC2

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Keller III, Tillman, , ,

C.

Mailing Address 626 Simmons Rd

City

Knoxville

State

TN

Zip Code

37932

FEC ID number of contributing
federal political committee.

C

Name of Employer

Keller Group

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A8F3AF22987104754A26

Amount of Each Receipt this Period

1000.00

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

2525.00

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 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kirkland, Ronald, , ,

A. Mailing Address 107 Tuckahoe Road

City

Jackson

State

TN

Zip Code

38305

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 Y
06 24 2025

Transaction ID : A2940AA450D9F459EA11

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

Full Name (Last, First, Middle Initial)

Winred

B. Mailing Address 4250 Fairfax Dr
Ste 600

City

Arlington

State

VA

Zip Code

22203-1665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A4D077A0C98C64E99871

Amount of Each Receipt this Period

250.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Krug, Terry, , ,

C. Mailing Address 9467 Grassy Meadow Blvd

City

Knoxville

State

TN

Zip Code

37931

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 ▼

205.00

Date of Receipt

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

Transaction ID : A398EA9455A1248398B1

Amount of Each Receipt this Period

55.00

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

305.00

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 14 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Lorenzo, Donald, , ,

A.

Mailing Address 1606 Redgrave Rd

City

Knoxville

State

TN

Zip Code

37922

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

ENGINEER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID : A14C854119799433A8D9

Amount of Each Receipt this Period

300.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mcfadden, Carol, , ,

Mailing Address 2929 Wesleyan St Apt

City

Houston

State

TX

Zip Code

77027

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

Manufacturing

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		23		2025

Transaction ID : AB8C9D5738DE14745882

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

McFadden, Carol, , ,

Mailing Address 2929 Wesleyan St

City

Houston

State

TX

Zip Code

77027

FEC ID number of contributing
federal political committee.

C

Name of Employer

self

Occupation

Manufacturing

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		07		2025

Transaction ID : A7881861A44A54C22889

Amount of Each Receipt this Period

750.00

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

2050.00

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 15 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Morris, Robert, , ,

A.

Mailing Address 2215 Remington Park Dr

City

Maryville

State

TN

Zip Code

37803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clayton Homes

Occupation

Vice President

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AEAAC26FB52FF4B1BA61

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Muscarella, Grace, , ,

B.

Mailing Address 7024 Chew Ave

Philadelphia

City

Philadelphia

State

PA

Zip Code

19119

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 Y
05 / 27 / 2025

Transaction ID : AC97D4C04283E49E39AE

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Nayak, Bharathi, , ,

C.

Mailing Address 14477 Mindello Drive

City

Fort Myers

State

FL

Zip Code

33905

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 ▼

1500.00

Date of Receipt

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

Transaction ID : A57E1B2A8BA0A4779965

Amount of Each Receipt this Period

500.00

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

1100.00

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 16 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Nayak, Bharathi, , ,

A. Mailing Address 14477 Mindello Drive

City

Fort Myers

State

FL

Zip Code

33905

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 ▼

2000.00

Date of Receipt

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

Transaction ID : AE2AF992EF0764329970

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Nichols, Hugh, , ,

B. Mailing Address 3044 Derby Town Dr

City

Greenbrier

State

TN

Zip Code

37073

FEC ID number of contributing
federal political committee.

C

Name of Employer

CSX

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 27 2025

Transaction ID : AB542B9968B514703BC0

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Palmer, Larry, , ,

C. Mailing Address 115 Settlers Rd
Harriman

City

Harriman

State

TN

Zip Code

37748

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 ▼

1000.00

Date of Receipt

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

Transaction ID : A96405C569E874538A8D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1700.00

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

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

PAGE 17 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Peterson, Paul, , ,

A.

Mailing Address 181 Harris Hill Rd

City

Maryville

State

TN

Zip Code

37804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Covenant Health

Occupation

Neurosurgeon

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A9F4C9675B2F34C239CD

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Pizza, Joseph M., , ,

B.

Mailing Address 120 route 17 North Suite115

City

Paramus

State

NJ

Zip Code

07652

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pharmasphere Inc

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A41DBAFA6644547A38BB

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Reddick, William, , ,

C.

Mailing Address 686 N Saint Marys Ln NW

City

Marietta

State

GA

Zip Code

30064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Paint Therapeutics

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : AF2020D6CDF014F0B936

Amount of Each Receipt this Period

100.00

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

2350.00

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

PAGE 18 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Reddick, William, , ,

A.

Mailing Address 686 N Saint Marys Ln NW

City

Marietta

State

GA

Zip Code

30064

FEC ID number of contributing
federal political committee.

C

Name of Employer

Paint Therapeutics

Occupation

CEO

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

Transaction ID : A77B84E50F9594C1E8B2

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Redman, Alice, Macomber, ,

B.

Mailing Address 1110 Scottie Ln

Knoxville

City

Knoxville

State

TN

Zip Code

37919

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 ▼

210.00

Date of Receipt

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

Transaction ID : AACDFD30FE3C84021B44

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Roth, Glenda, , ,

C.

Mailing Address 9311 Daybreak Dr

City

Knoxville

State

TN

Zip Code

37931

FEC ID number of contributing
federal political committee.

C

Name of Employer

Quality Machine& Welding

Occupation

Business Owner

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A1BAC494051D4487FA64

Amount of Each Receipt this Period

250.00

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

550.00

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

PAGE 19 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Sabia, Carmine, , ,

A.

Mailing Address 227 Belmont Ave

City

Belleville

State

NJ

Zip Code

07109

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
Journalist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

204.10

Date of Receipt

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

Transaction ID : A7353C5F952874EC5845

Amount of Each Receipt this Period

100.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Sabia, Carmine, , ,

Mailing Address 227 Belmont Ave

City

Belleville

State

NJ

Zip Code

07109

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
Journalist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

204.10

Date of Receipt

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

Transaction ID : AB710B21869E1411BBF0

Amount of Each Receipt this Period

104.10

☐ Memo Item

Earmarked (Non-Directed) through Winred

C.

Full Name (Last, First, Middle Initial)

Winred

Mailing Address 4250 Fairfax Dr
Ste 600

City

Arlington

State

VA

Zip Code

22203-1665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A5F873680333D40C7865

Amount of Each Receipt this Period

104.10

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.**SUBTOTAL** of Receipts This Page (optional)..... ►

204.10

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 20 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Sabia, Carmine, , ,

A.

Mailing Address 227 Belmont Ave

City

Belleville

State

NJ

Zip Code

07109

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
Journalist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

308.20

Date of Receipt

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

Transaction ID : AECF7600F1D5C423ABDB

Amount of Each Receipt this Period

104.10

☐ Memo Item

Earmarked (Non-Directed) through Winred

B.

Full Name (Last, First, Middle Initial)

Winred

Mailing Address 4250 Fairfax Dr
Ste 600

City

Arlington

State

VA

Zip Code

22203-1665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A4F3FA6155E3146B4A4B

Amount of Each Receipt this Period

104.10

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.**C.**

Full Name (Last, First, Middle Initial)

Schachtel, Alexander, , ,

Mailing Address 2 14th Street

City

Hoboken

State

NJ

Zip Code

07030-6771

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
LAWYER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID : A2549D02A3C4642E98A2

Amount of Each Receipt this Period

75.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

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

179.10

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 21 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESSFull Name (Last, First, Middle Initial)
Winred**A.**Mailing Address 4250 Fairfax Dr
Ste 600City
ArlingtonState
VAZip Code
22203-1665FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : AC8315E443E93421EB50

Amount of Each Receipt this Period

75.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.**B.**Full Name (Last, First, Middle Initial)
Schachtel, Alexander, , ,

Mailing Address 2 14th Street

City
HobokenState
NJZip Code
07030-6771FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
LAWYER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

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

Transaction ID : A0807F7FC3D564320B4D

Amount of Each Receipt this Period

75.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

C.Full Name (Last, First, Middle Initial)
WinredMailing Address 4250 Fairfax Dr
Ste 600City
ArlingtonState
VAZip Code
22203-1665FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A269DEF74142844FF8E7

Amount of Each Receipt this Period

75.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.

75.00

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

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

PAGE 22 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Schachtel, Alexander, , ,

A.

Mailing Address 2 14th Street

City

Hoboken

State

NJ

Zip Code

07030-6771

FEC ID number of contributing
federal political committee.

C

Name of Employer
selfOccupation
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
06		25		2025

Transaction ID : AAC22C29AE3E1439B870

Amount of Each Receipt this Period

75.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

B.

Full Name (Last, First, Middle Initial)

Winred

Mailing Address 4250 Fairfax Dr
Ste 600

City

Arlington

State

VA

Zip Code

22203-1665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A82FD3A0730C249F3B1E

Amount of Each Receipt this Period

75.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.**C.**

Full Name (Last, First, Middle Initial)

shiepe, robert, , ,

Mailing Address 8117 W Manchester Ave, 244
244

City

Playa Del Rey

State

CA

Zip Code

90293

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 ▼

300.00

Date of Receipt

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

Transaction ID : AFF4E54C77D204B49AC7

Amount of Each Receipt this Period

50.00

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

125.00

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 23 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

shiepe, robert, , ,

A.Mailing Address 8117 W Manchester Ave, 244
244

City

Playa Del Rey

State

CA

Zip Code

90293

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 24 2025

Transaction ID : A37B8E5F0CB9A4A1DA72

Amount of Each Receipt this Period

50.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

shiepe, robert, , ,

Mailing Address 8117 W Manchester Ave, 244
244

City

Playa Del Rey

State

CA

Zip Code

90293

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 ▼

400.00

Date of Receipt

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

Transaction ID : A787668F79F1D49EEA96

Amount of Each Receipt this Period

50.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Smith, William, E, Mr,

Mailing Address 3615 S Galloway Dr

City

Memphis

State

TN

Zip Code

38111

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 Y
06 05 2025

Transaction ID : A7EEBB41007E54F7DB29

Amount of Each Receipt this Period

250.00

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

350.00

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

PAGE 24 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

SNYDER, ELIZABETH, , ,

A.

Mailing Address 5812 Hillock Rd

City

Knoxville

State

TN

Zip Code

37918

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 ▼

258.90

Date of Receipt

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

Transaction ID : ACA8C6854552943C6949

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Stewart, Scott, , ,

B.

Mailing Address 4601 Lafayette Ave

City

Fort Worth

State

TX

Zip Code

76107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stewart PLLC

Occupation

Attorney

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A28D6DCEF445B48E4893

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Tiblier, Hannah, , ,

C.

Mailing Address 1226 Bradley Dr

City

Franklin

State

TN

Zip Code

37069

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 Y
05 27 2025

Transaction ID : ADECA45D1972744F5B41

Amount of Each Receipt this Period

500.00

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

625.00

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

PAGE 25 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Truan, Stephen, , ,

A. Mailing Address 6541 Virginia Lee LnCity
KnoxvilleState
TNZip Code
37918FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AFFB2AB8A741246AF95A

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Wenaas, Joan, , ,

B. Mailing Address 569 Old Parksville Rd NECity
ClevelandState
TNZip Code
37323FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : AB51EA6E89F104F9F920

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Whaley, Regenia, , ,

C. Mailing Address 2902 Legacy Pointe Way Apt 113City
KnoxvilleState
TNZip Code
37921-2141FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : A36B3A34C18C04F1A933

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

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

3725.00

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

PAGE 26 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESSFull Name (Last, First, Middle Initial)
Winred**A.**Mailing Address 4250 Fairfax Dr
Ste 600City
ArlingtonState
VAZip Code
22203-1665FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A0E9D9C98EDC74BE0AE8

Amount of Each Receipt this Period

25.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.Full Name (Last, First, Middle Initial)
Whitehurst, W, , ,**B.**

Mailing Address 130 Thornoak Dr

City
MartinState
TNZip Code
38237FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A9711B95ADE16473E8D6

Amount of Each Receipt this Period

100.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
Whitman, Barton, D., ,**C.**

Mailing Address 1516 Rarity Way Parkway

City
VonoreState
TNZip Code
37885-5349FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A4C60447DFACF4C52A30

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

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

150.00

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 27 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESSFull Name (Last, First, Middle Initial)
Winred**A.**Mailing Address 4250 Fairfax Dr
Ste 600City
ArlingtonState
VAZip Code
22203-1665FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A94E7AC81C1D9483B816

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.Full Name (Last, First, Middle Initial)
Whitman, Barton, D., ,**B.**

Mailing Address 1516 Rarity Way Parkway

City
VonoreState
TNZip Code
37885-5349FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : AD4051D6ACB9241588A8

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

Full Name (Last, First, Middle Initial)
Winred**C.**Mailing Address 4250 Fairfax Dr
Ste 600City
ArlingtonState
VAZip Code
22203-1665FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A2DE5CCDA7BA74A57AA8

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

50.00

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

PAGE 28 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Whitman, Barton, D., ,

A.

Mailing Address 1516 Rarity Way Parkway

City

Vonore

State

TN

Zip Code

37885-5349

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 ▼

350.00

Date of Receipt

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

Transaction ID : A740685277E2746B69E2

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

B.

Full Name (Last, First, Middle Initial)

Winred

Mailing Address 4250 Fairfax Dr
Ste 600

City

Arlington

State

VA

Zip Code

22203-1665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A33816A0A69AB42C4BF7

Amount of Each Receipt this Period

50.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.**C.**

Full Name (Last, First, Middle Initial)

Williamson, Robert, D., ,

Mailing Address 2504 Croydon Rd
Knoxville

City

Knoxville

State

TN

Zip Code

37921

FEC ID number of contributing
federal political committee.

C

Name of Employer

Richard L Beah Juvenile ServiceE CENTER

Occupation

Correctional Officer

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : AD4BD08925E6747B1843

Amount of Each Receipt this Period

100.00

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

150.00

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 29 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Williamson, Robert, D, ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 16 / 2025	
Mailing Address 2504 Croydon Rd Knoxville			Transaction ID : A034D773017DC424F81F	
City Knoxville	State TN	Zip Code 37921	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer Richard L Beah Juvenile ServiceE CENTER		Occupation Correctional Officer		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 400.00		
B. Full Name (Last, First, Middle Initial) Woodruff, Piers, , ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 27 / 2025	
Mailing Address PO Box 503			Transaction ID : AE373C5F2AE1E4FB784C	
City Somerset	State VA	Zip Code 22972	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer self		Occupation Farmer		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 300.00		
C. Full Name (Last, First, Middle Initial) Woods, Diane, , ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 26 / 2025	
Mailing Address 324 Escarpment Oak			Transaction ID : AF6AC365B37D04368A9F	
City New Braunfels	State TX	Zip Code 78130	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer Retired		Occupation RETIRED		
Receipt For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 238.00		
SUBTOTAL of Receipts This Page (optional)..... ▶			300.00	
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 30 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Worsham, Amy, , ,

A. Mailing Address 3933 Gordon Smith Rd.City
KnoxvilleState
TNZip Code
37938-4218FEC ID number of contributing
federal political committee.

C

Name of Employer
Brothers BeddingOccupation
SALES

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

220.13

Date of Receipt

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

Transaction ID : A63BD687FF80542AFBE2

Amount of Each Receipt this Period

15.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

Full Name (Last, First, Middle Initial)

Winred

B. Mailing Address 4250 Fairfax Dr
Ste 600City
ArlingtonState
VAZip Code
22203-1665FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : A694F4019943F4F70B1B

Amount of Each Receipt this Period

15.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not affected.

Full Name (Last, First, Middle Initial)

Worsham, Amy, , ,

C. Mailing Address 3933 Gordon Smith Rd.City
KnoxvilleState
TNZip Code
37938-4218FEC ID number of contributing
federal political committee.

C

Name of Employer
Brothers BeddingOccupation
SALES

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.13

Date of Receipt

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

Transaction ID : A369DA9AACA4F47F5B44

Amount of Each Receipt this Period

15.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

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

30.00

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

PAGE 31 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESSFull Name (Last, First, Middle Initial)
Winred**A.**Mailing Address 4250 Fairfax Dr
Ste 600City
ArlingtonState
VAZip Code
22203-1665FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

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

Transaction ID : ACA22D16094EE4A00BBC

Amount of Each Receipt this Period

15.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.Full Name (Last, First, Middle Initial)
Worsham, Amy, , ,**B.**

Mailing Address 3933 Gordon Smith Rd.

City
KnoxvilleState
TNZip Code
37938-4218FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Brothers Bedding

SALES

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.13

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		08		2025

Transaction ID : A5C0EC8D6251F4A4187D

Amount of Each Receipt this Period

15.00

☐ Memo Item

Earmarked (Non-Directed) through Winred

Full Name (Last, First, Middle Initial)
Winred**C.**Mailing Address 4250 Fairfax Dr
Ste 600City
ArlingtonState
VAZip Code
22203-1665FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3705.51

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		08		2025

Transaction ID : AA7232C822FBD4C0DB38

Amount of Each Receipt this Period

15.00

☒ Memo Item

Intermediary

Total Earmarked through conduit. PAC limit not
affected.**SUBTOTAL** of Receipts This Page (optional)..... ▶

15.00

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

26201.70

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

PAGE 32 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**A.**

Mailing Address 1120 Connecticut Avenue NW

Suite 600

City

Washington

State

TN

Zip Code

20036

FEC ID number of contributing
federal political committee.**C** C00004275

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID : A1855927916574EC6A05

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

American Short Line & Regional RR Assoc PAC**B.**

Mailing Address 50 F St NW

Suite 7020

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.**C** C00298190

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A561EE3778F0D4F20BAC

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN STAFFING ASSOCIATION STAFFING PAC**C.**

Mailing Address 277 S Washington St

Suite 200

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing
federal political committee.**C** C00145623

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A7F307173CAE44758B74

Amount of Each Receipt this Period

5000.00



Memo Item

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

8500.00

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 33 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

ANIMAL WELLNESS ACTION PAC**A.**Mailing Address 611 Pennsylvania Ave NW
#136City
WashingtonState
DCZip Code
20003FEC ID number of contributing
federal political committee.**C** C00679860

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A8C6804F4A8CA4EF9A30

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

National Apartment Association PAC**B.**Mailing Address 4300 Wilson Blvd
Suite 800City
ArlingtonState
VAZip Code
22203FEC ID number of contributing
federal political committee.**C** C00113241

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A968A5616ECA1486E90E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TOYOTA MOTOR NORTH AMERICA, INC POLITICAL ACTION COMMITTEE (TOYOTA/LEXUS PAC)**C.**Mailing Address 325 7th St NW
Suite 1000City
WashingtonState
DCZip Code
20004FEC ID number of contributing
federal political committee.**C** C00542365

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AB530DC4C203B4056A24

Amount of Each Receipt this Period

1000.00

☐ Memo Item

4000.00

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

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

PAGE 34 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

Union Pacific Corporation Fund for Effective Government

A.Mailing Address 1001 Pennsylvania Ave NW
Suite 440City
WashingtonState
DCZip Code
20004FEC ID number of contributing
federal political committee.**C** C00010470

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A27406A82AF7D4AD4BCC

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

2000.00

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

14500.00

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

PAGE 35 OF 99

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

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESSFull Name (Last, First, Middle Initial)
Security Bank and Trust**A.** Mailing Address PO Box 1209City
ParisState
TNZip Code
38242FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4761.63

Date of Receipt

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

Transaction ID : AE2ADC0F09A5B480A854

Amount of Each Receipt this Period

785.12

☐ Memo Item
Interest IncomeFull Name (Last, First, Middle Initial)
Security Bank and Trust**B.** Mailing Address PO Box 1209City
ParisState
TNZip Code
38242FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5568.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 31 2025

Transaction ID : A4150E9F9A40140169F0

Amount of Each Receipt this Period

806.45

☐ Memo Item
Interest IncomeFull Name (Last, First, Middle Initial)
Security Bank and Trust**C.** Mailing Address PO Box 1209City
ParisState
TNZip Code
38242FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6350.75

Date of Receipt

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

Transaction ID : A429BE3CEDD714278A4C

Amount of Each Receipt this Period

782.67

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

2374.24

2374.24

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

PAGE 36 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Amazon.com

Mailing Address 1516 2nd Ave

City
SeattleState
WAZip Code
98101Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

19.65

Transaction ID : BEFED01B61EFB4923B71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

471.27

Transaction ID : BAE4337D664ED4670A0F

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
Fort WorthState
TXZip Code
76155Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

608.97

Transaction ID : BEA3BDEFC14C44D93BA8

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

1099.89

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

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

PAGE 37 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Anedot Inc

Mailing Address 1340 Poydras St

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

211.07

Transaction ID : B0DC48F8827B843C9BB5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot Inc

Mailing Address 1340 Poydras St

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

232.16

Transaction ID : B9B62DF560D0F4E7EA72

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot Inc

Mailing Address 1340 Poydras St

City
New OrleansState
LAZip Code
70112Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

147.58

Transaction ID : B7F7C8B7F84B5460F8F1

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

590.81

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 38 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Aristotle International

Mailing Address 205 Pennsylvania Ave SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Data Storage

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2250.00

Transaction ID : BFB23A34B87184E59A71

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Aubreys

Mailing Address 6005 Brookvale Lane

City
KnoxvilleState
TNZip Code
37920Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

42.12

Transaction ID : BA7E22C17BDEF4EA98A3

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Aubreys

Mailing Address 6005 Brookvale Lane

City
KnoxvilleState
TNZip Code
37920Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

71.01

Transaction ID : BD27B7C6B0C5C41EDB40

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

2363.13

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 39 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Aubreys

Mailing Address 6005 Brookvale Lane

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37920

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

115.86

Transaction ID : B1D2A4BF977854FF0B71

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Babalu

Mailing Address 412 S Gay St

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37902

FEC Identification Number

CPurpose of Disbursement
Catering

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

206.54

Transaction ID : B26E0DB8D352B4839B1F

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. BHS Foundation

Mailing Address P.O. Box 31729

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37930

FEC Identification Number

CPurpose of Disbursement
Donation

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : BBB74ADED8318480E82B

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

1322.40

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 40 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Big Eds Pizza

Mailing Address 101 Broadway Ave

Date of Disbursement

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

City
Oak RidgeState
TNZip Code
37830

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

111.36

Transaction ID : B3B8C1CB6B83047E89C2

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Big Eds Pizza

Mailing Address 101 Broadway Ave

Date of Disbursement

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

City
Oak RidgeState
TNZip Code
37830

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

60.96

Transaction ID : BE2E2BB51F2A348C488C

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Calhoun's

Mailing Address 400 Neyland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37902

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

129.60

Transaction ID : B1FF08311AE354B9E806

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

301.92

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

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

PAGE 41 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Cameron, Charles, , ,

Mailing Address 1543 Boyle St

City
AlcoaState
TNZip Code
37701Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B57372F976DDF47C38FA

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cameron, Charles, , ,

Mailing Address 1543 Boyle St

City
AlcoaState
TNZip Code
37701Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : BFF49966955D84604878

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Capital Grille

Mailing Address 601 Pennsylvania Ave NW

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

442.19

Transaction ID : BDE69E37A9C7E45149D5

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

3442.19

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

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

PAGE 42 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 404 Neyland Dr

City
WashingtonState
CAZip Code
20003Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

950.19

Transaction ID : B797E2C4D6BB44243A28

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Capitol Hill Club

Mailing Address 404 Neyland Dr

City
WashingtonState
CAZip Code
20003Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

313.30

Transaction ID : B1DC6839FD9634D75BC7

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Capitol Hill Club

Mailing Address 404 Neyland Dr

City
WashingtonState
CAZip Code
20003Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1466.34

Transaction ID : B74D894CBE6994A28AAD

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

2729.83

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

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

PAGE 43 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 404 Neyland Dr

City
WashingtonState
CAZip Code
20003Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

556.73

Transaction ID : B6C04FA823E444E42BC6

☐ Memo Item**B. Capitol Hill Club**

Mailing Address 404 Neyland Dr

City
WashingtonState
CAZip Code
20003Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

216.34

Transaction ID : BD6C29303F7084596866

☐ Memo Item**C. Cityview Magazine**

Mailing Address 6812 Baum Dr

City
KnoxvilleState
TNZip Code
37919Purpose of Disbursement
Newspaper Ads

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B078FADFF9AA14A24BDB

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

3273.07

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 44 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Claiborne County GOP

Mailing Address 380 Goins Chapel Rd

Date of Disbursement

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

City
TazewellState
TNZip Code
37879

FEC Identification Number

CPurpose of Disbursement
Donation

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2500.00

Transaction ID : BA4885AD568714459A10

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. ColdSpark

Mailing Address 307 4th Ave

Date of Disbursement

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

City
PittsburghState
PAZip Code
15222

FEC Identification Number

CPurpose of Disbursement
Political Admin Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6025.16

Transaction ID : B7055FF1C7BB54B94B0E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. ColdSpark

Mailing Address 307 4th Ave

Date of Disbursement

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

City
PittsburghState
PAZip Code
15222

FEC Identification Number

CPurpose of Disbursement
Political Admin Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5192.62

Transaction ID : BB6F1F99D348F4FD1B23

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

13717.78

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

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

PAGE 45 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ColdSpark

Mailing Address 307 4th Ave

City
PittsburghState
PAZip Code
15222Purpose of Disbursement
Political Admin Consulting

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5775.94

Transaction ID : BC1FA9F15F2D245ACAFE

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. D1 Hardin Valley LLC

Mailing Address 11516 Ivy Chase Lane

City
KnoxvilleState
TNZip Code
37934Purpose of Disbursement
Sponsorships

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B035E2ED1911D46218AA

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Direct Mail Processors

Mailing Address 1150 Conrad Ct.

City
HagerstownState
MDZip Code
21740Purpose of Disbursement
Caging and Escrow

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1217.50

Transaction ID : BC9AC623897CD462E865

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

9493.44

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

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

PAGE 47 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Don Jose Grill

Mailing Address 7505 Tazewell Pike

Date of Disbursement

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

City
CorrytonState
TNZip Code
37721Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

36.00

Transaction ID : B3E2258EFB71C400187F

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Don Jose Grill

Mailing Address 7505 Tazewell Pike

Date of Disbursement

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

City
CorrytonState
TNZip Code
37721Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

108.21

Transaction ID : B2FB61558BE1C445CA92

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Don Jose Grill

Mailing Address 7505 Tazewell Pike

Date of Disbursement

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

City
CorrytonState
TNZip Code
37721Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

102.71

Transaction ID : B081C409ACE9144D8B3B

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

246.92

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

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

PAGE 49 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Don Jose Grill

Mailing Address 7505 Tazewell Pike

Date of Disbursement

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

City
CorrytonState
TNZip Code
37721

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

76.44

Transaction ID : B4FAC20EDB05C453087E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Elite Card Processing

Mailing Address 13701 Maugan Suite 5

Date of Disbursement

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

City
HagerstownState
MDZip Code
21740

FEC Identification Number

CPurpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

116.03

Transaction ID : BC0998AF6FC5E4D4F99E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Elite Card Processing

Mailing Address 13701 Maugan Suite 5

Date of Disbursement

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

City
HagerstownState
MDZip Code
21740

FEC Identification Number

CPurpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

618.28

Transaction ID : BD359F31A00494F0084E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

810.75

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 50 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Elite Card Processing

Mailing Address 13701 Maugan Suite 5

Date of Disbursement

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

City
HagerstownState
MDZip Code
21740

FEC Identification Number

CPurpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

87.41

Transaction ID : BBFCB6600962D42E2AC7

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. FirstBank

Mailing Address 1817 West End Ave

Date of Disbursement

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

City
NashvilleState
TNZip Code
37203

FEC Identification Number

CPurpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

40.00

Transaction ID : B5C4AAC0C40954E4F948

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. FirstBank

Mailing Address 1817 West End Ave

Date of Disbursement

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

City
NashvilleState
TNZip Code
37203

FEC Identification Number

CPurpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : BD50EA9BA6F5046D89D5

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

162.41

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

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

PAGE 51 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FirstBank

Mailing Address 1817 West End Ave

Date of Disbursement

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

City
NashvilleState
TNZip Code
37203

FEC Identification Number

CPurpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.00

Transaction ID : B377986C73FBB46C29B2

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. FirstBank

Mailing Address 1817 West End Ave

Date of Disbursement

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

City
NashvilleState
TNZip Code
37203

FEC Identification Number

CPurpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : B760FDBEE033145AA855

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. FirstBank

Mailing Address 1817 West End Ave

Date of Disbursement

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

City
NashvilleState
TNZip Code
37203

FEC Identification Number

CPurpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

69.90

Transaction ID : B09FFE72313394EBCADB

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

109.90

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

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

PAGE 52 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FirstBank

Mailing Address 1817 West End Ave

Date of Disbursement

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

City
NashvilleState
TNZip Code
37203

FEC Identification Number

CPurpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

40.00

Transaction ID : BF21C0D9C5AF04ECCA3A

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. FirstBank

Mailing Address 1817 West End Ave

Date of Disbursement

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

City
NashvilleState
TNZip Code
37203

FEC Identification Number

CPurpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

35.00

Transaction ID : B206904C6E21D4A8CB62

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. FirstBank

Mailing Address 1817 West End Ave

Date of Disbursement

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

City
NashvilleState
TNZip Code
37203

FEC Identification Number

CPurpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.00

Transaction ID : BAC539CF5EE524D4D9C2

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

80.00

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

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

PAGE 53 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Fulfillment Solutions Inc

Mailing Address 44970 Falcon Place

City
SterlingState
VAZip Code
20166Purpose of Disbursement
Printing Expense

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1519.72

Transaction ID : BDAB6F794FD6943BC984

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fulfillment Solutions Inc

Mailing Address 44970 Falcon Place

City
SterlingState
VAZip Code
20166Purpose of Disbursement
Printing Expense

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2593.28

Transaction ID : B02ADBFAE58224A70BAA

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fulfillment Solutions Inc

Mailing Address 44970 Falcon Place

City
SterlingState
VAZip Code
20166Purpose of Disbursement
Printing Expense

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1319.91

Transaction ID : B3D641DF307994609960

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

5432.91

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)

PAGE 54 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Fulfillment Solutions Inc

Mailing Address 44970 Falcon Place

City
SterlingState
VAZip Code
20166Purpose of Disbursement
Postage and Delivery

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3020.56

Transaction ID : BF96532E7FE4E46218C2

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fulfillment Solutions Inc

Mailing Address 44970 Falcon Place

City
SterlingState
VAZip Code
20166Purpose of Disbursement
Printing Expense

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1524.53

Transaction ID : B708C4EF1DDD24B42BB6

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fulfillment Solutions Inc

Mailing Address 44970 Falcon Place

City
SterlingState
VAZip Code
20166Purpose of Disbursement
Postage and Delivery

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9707.82

Transaction ID : BB9BAEA458B464958AF3

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

14252.91

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)

PAGE 55 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GoDaddy.com

Mailing Address 14455 North Hayden Rd

City
ScottsdaleState
AZZip Code
85260Purpose of Disbursement
Domain / Web Expense

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

210.80

Transaction ID : B45ACBE9E231748AAB23

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Google

Mailing Address 1600 Amphitheatre Parkway

City
Mountain ViewState
CAZip Code
94043Purpose of Disbursement
Telephone / Internet

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

39.33

Transaction ID : BECF3931A6782464C85A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Google

Mailing Address 1600 Amphitheatre Parkway

City
Mountain ViewState
CAZip Code
94043Purpose of Disbursement
Telephone / Internet

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

39.33

Transaction ID : B2A74498CE710425B845

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

289.46

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 56 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Hampton Inn

Mailing Address 1265 First Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

159.44

Transaction ID : B1C68F13B4AF24ECE85B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Henry's Deli

Mailing Address 7231 Tazewell Pike

City
CorrytonState
TNZip Code
37721Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

19.01

Transaction ID : B1F2ACF117B414611930

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Henry's Deli

Mailing Address 7231 Tazewell Pike

City
CorrytonState
TNZip Code
37721Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

45.23

Transaction ID : B051FC29D137749CD938

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

223.68

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 57 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Henry's Deli

Mailing Address 7231 Tazewell Pike

Date of Disbursement

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

City
CorrytonState
TNZip Code
37721

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

40.84

Transaction ID : B731E31BF5B814839BB5

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Henry's Deli

Mailing Address 7231 Tazewell Pike

Date of Disbursement

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

City
CorrytonState
TNZip Code
37721

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20.73

Transaction ID : B9CF6AD9F96194C5583E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Henry's Deli

Mailing Address 7231 Tazewell Pike

Date of Disbursement

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

City
CorrytonState
TNZip Code
37721

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20.32

Transaction ID : B7114A24A868F4E708BD

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

81.89

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 58 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Hilton Hotels

Mailing Address 1 First Stamford Pl

Date of Disbursement

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

City
StamfordState
CTZip Code
06902

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

418.47

Transaction ID : B21C641E941E54C78AAF

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Hilton Hotels

Mailing Address 1 First Stamford Pl

Date of Disbursement

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

City
StamfordState
CTZip Code
06902

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

287.50

Transaction ID : BD76AAF7FD2F647E8841

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Hilton Hotels

Mailing Address 1 First Stamford Pl

Date of Disbursement

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

City
StamfordState
CTZip Code
06902

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

517.50

Transaction ID : BDD84944B845847869CA

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1223.47

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 59 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Hilton Hotels

Mailing Address 1 First Stamford Pl

City
StamfordState
CTZip Code
06902Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

389.91

Transaction ID : B9DFD47961A6043C0855

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hotel Washington

Mailing Address 515 15th St NW

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

607.57

Transaction ID : B8F2670D80A9944D3BD0

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hotel Washington

Mailing Address 515 15th St NW

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.01

Transaction ID : B37EDE1B889E34FAB9F4

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

997.49

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 60 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Hotel Washington

Mailing Address 515 15th St NW

Date of Disbursement

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

City
WashingtonState
DCZip Code
20004Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

25.17

Transaction ID : BD919C2CAD4534A78B51

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HSP DirectMailing Address 20130 Lakeview Center Plaza
Suite 300

Date of Disbursement

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

City
AshburnState
VAZip Code
20147Purpose of Disbursement
Creative Management Fee

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2260.00

Transaction ID : B523434A6AF044C2D9DB

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HSP DirectMailing Address 20130 Lakeview Center Plaza
Suite 300

Date of Disbursement

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

City
AshburnState
VAZip Code
20147Purpose of Disbursement
Creative Program Management

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

263.29

Transaction ID : B41E4F19B4864484FAE0

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

2548.46

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 61 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HSP DirectMailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147Purpose of Disbursement
Creative Program Management

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

306.34

Transaction ID : BE63698F9D4374EA6BEB

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hyatt Place

Mailing Address 33 New York Avenue Ne

City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

12.60

Transaction ID : B10500068BE7F4850908

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JBest & CompanyMailing Address 11235 Davenport St
Ste 107City
OmahaState
NEZip Code
68154Purpose of Disbursement
Political Admin Consulting

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BCB6B23BD440549348C6

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**2818.94****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 62 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JBest & CompanyMailing Address 11235 Davenport St
Ste 107City
OmahaState
NEZip Code
68154Purpose of Disbursement
Political Admin Consulting

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : BBF86182088CF4121B15

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JBest & CompanyMailing Address 11235 Davenport St
Ste 107City
OmahaState
NEZip Code
68154Purpose of Disbursement
Political Admin Consulting

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B95053A0634C4424A8A0

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Littons Market

Mailing Address 3603 Essary Dr

City
KnoxvilleState
TNZip Code
37918Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

310.32

Transaction ID : BC563C5CEB6BC42E398E

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

5310.32

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 63 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marcus Hill Photography

Mailing Address 171 Rendezous Rd

City
RockwoodState
TNZip Code
37854Purpose of Disbursement
Photography

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B31229BD3709A4E6E813

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Marcus Hill Photography

Mailing Address 171 Rendezous Rd

City
RockwoodState
TNZip Code
37854Purpose of Disbursement
Photography

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B7C6C74F883544B078AB

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marcus Hill Photography

Mailing Address 171 Rendezous Rd

City
RockwoodState
TNZip Code
37854Purpose of Disbursement
Photography

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B6F50EDF150534DFAB22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**2250.00****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)

PAGE 64 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marcus Hill Photography

Mailing Address 171 Rendezous Rd

City
RockwoodState
TNZip Code
37854Purpose of Disbursement
Photography

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B3AD22DE4D03F4980B3C

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Marcus Hill Photography

Mailing Address 171 Rendezous Rd

City
RockwoodState
TNZip Code
37854Purpose of Disbursement
Photography

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : BA43E37FA258A48EE9BF

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Marcus Hill Photography

Mailing Address 171 Rendezous Rd

City
RockwoodState
TNZip Code
37854Purpose of Disbursement
Photography

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : BBA6192DA082C4A629B7

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

3750.00

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)

PAGE 65 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. McAfee, Thomas, , ,

Mailing Address 261 Patriot Lane

City
New TazewellState
TNZip Code
37825Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3750.00

Transaction ID : B2934D9AD8D79422CBB9

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McAfee, Thomas, , ,

Mailing Address 261 Patriot Lane

City
New TazewellState
TNZip Code
37825Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3750.00

Transaction ID : BE067713AD3A44A3183A

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. McAfee, Thomas, , ,

Mailing Address 261 Patriot Lane

City
New TazewellState
TNZip Code
37825Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3750.00

Transaction ID : BCE1D69229E4F49CDB4E

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

11250.00

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)

PAGE 66 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. McAfee, Thomas, , ,

Mailing Address 261 Patriot Lane

City
New TazewellState
TNZip Code
37825Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7500.00

Transaction ID : B12F2386AA4AF4C1AB9B

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. McAfee, Thomas, , ,

Mailing Address 261 Patriot Lane

City
New TazewellState
TNZip Code
37825Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3750.00

Transaction ID : BF0955550A5AC4E8F85B

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. McAfee, Thomas, , ,

Mailing Address 261 Patriot Lane

City
New TazewellState
TNZip Code
37825Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

7500.00

Transaction ID : B8CA3E247001B42B6AC8

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

18750.00

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)

PAGE 67 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Middletown Valley BankMailing Address 11325 Random Hills Rd
Suite 240City
FairfaxState
VAZip Code
22030Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

61.61

Transaction ID : B0DFD415FA0AF4995B9D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Middletown Valley BankMailing Address 11325 Random Hills Rd
Suite 240City
FairfaxState
VAZip Code
22030Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

44.25

Transaction ID : BC226D3CDDFFCD48D79BE

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Middletown Valley BankMailing Address 11325 Random Hills Rd
Suite 240City
FairfaxState
VAZip Code
22030Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

44.63

Transaction ID : BE8965253A34749E4BCB

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

150.49

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 68 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OnPoint Data StrategyMailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147Purpose of Disbursement
Mail List Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B79750D4C0237460E931

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OnPoint Data StrategyMailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147Purpose of Disbursement
Mail List Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1671.68

Transaction ID : B936F5617494F4E1D98B

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OnPoint Data StrategyMailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147Purpose of Disbursement
Mail List Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

266.40

Transaction ID : B9117049BE8E74046960

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

2338.08

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 69 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OnPoint Data StrategyMailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147Purpose of Disbursement
Data List Fulfillment

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

440.00

Transaction ID : BCDB84E077FAC45B4B42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OnPoint Data StrategyMailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147Purpose of Disbursement
Mail List Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

587.45

Transaction ID : BDF5AEA6FC63841DBA18

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. OnPoint Data StrategyMailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147Purpose of Disbursement
Mail List Procesing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1171.03

Transaction ID : B78A0B0E30100419DB6B

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

2198.48

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 70 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. OnPoint Data StrategyMailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147Purpose of Disbursement
Mail List Processing

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : B0A9EE011EBBE4CDABCB

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Pete's Coffee Shop

Mailing Address 540 Union Ave

City
KnoxvilleState
TNZip Code
37902Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

35.73

Transaction ID : BEF1E976BFD494A5F937

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Pete's Coffee Shop

Mailing Address 540 Union Ave

City
KnoxvilleState
TNZip Code
37902Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

23.86

Transaction ID : BCE756BE4F7B34D2883B

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

409.59

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 71 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Pizza Inn

Mailing Address 5420 Clinton Hwy

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37912

FEC Identification Number

CPurpose of Disbursement
Catering

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

217.57

Transaction ID : B267E4BA18D1F4E0C912

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Pizza Inn

Mailing Address 5420 Clinton Hwy

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37912

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

92.59

Transaction ID : BC9955645C40D4198B91

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Political Financial ManagementMailing Address 95 White Bridge Rd
Suite 207

Date of Disbursement

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

City
NashvilleState
TNZip Code
37205

FEC Identification Number

CPurpose of Disbursement
Compliance / Accounting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1750.00

Transaction ID : B4189322F163B45D69B4

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

2060.16

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

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

PAGE 72 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Russell Printing

Mailing Address 1800 Grand Ave

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37916

FEC Identification Number

CPurpose of Disbursement
Campaign Supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

109.25

Transaction ID : B10072516CBAB4273AF2

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Security Central

Mailing Address 316 Security Drive

Date of Disbursement

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

City
StatesvilleState
TNZip Code
28677

FEC Identification Number

CPurpose of Disbursement
Security

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

30.00

Transaction ID : BA0F5517E4E29453085F

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Select Designs Screen Printing & EmbroideryMailing Address 226 W Stevens St
Suite B

Date of Disbursement

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

City
CookevilleState
TNZip Code
38501

FEC Identification Number

CPurpose of Disbursement
Campaign Supplies

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2617.54

Transaction ID : BBFED815AB6A5450CB53

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

2756.79

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

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

PAGE 73 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Signature Systems Inc.Mailing Address 6914 Wright Rd
Apt 10City
KnoxvilleState
TNZip Code
37931Purpose of Disbursement
Security Equipment

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2214.76

Transaction ID : BCF8E2EDDA1D147D79FD

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. The Original Louis

Mailing Address 4661 Old Broadway

City
KnoxvilleState
TNZip Code
37918Purpose of Disbursement
Meals

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

118.22

Transaction ID : B367D1F60E802440F813

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TMA Direct Inc.

Mailing Address 2000 Edmund Halley Dr

City
RestonState
VAZip Code
20191-3436Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

665.03

Transaction ID : BA927EF81AA0049F39F7

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

2998.01

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)

PAGE 74 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TMA Direct Inc.

Mailing Address 2000 Edmund Halley Dr

Date of Disbursement

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

City
RestonState
VAZip Code
20191-3436

FEC Identification Number

CPurpose of Disbursement
Fundraising Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

314.63

Transaction ID : BE70805ECF65D4B5EA6A

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. TMA Direct Inc.

Mailing Address 2000 Edmund Halley Dr

Date of Disbursement

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

City
RestonState
VAZip Code
20191-3436

FEC Identification Number

CPurpose of Disbursement
Fundraising Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

98.38

Transaction ID : BF7FE9A9743224B7DB6D

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Tumlin, Chloe, , ,

Mailing Address 8797 Skybrook Dr

Date of Disbursement

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

City
OoltewahState
TNZip Code
37363

FEC Identification Number

CPurpose of Disbursement
Campaign Worker

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

250.00

Transaction ID : BDC5622A7D65D4952A92

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

663.01

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

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

PAGE 75 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Tumlin, Chloe, , ,

Mailing Address 8797 Skybrook Dr

City
OoltewahState
TNZip Code
37363Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B0EC60297E4004517971

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Tumlin, Chloe, , ,

Mailing Address 8797 Skybrook Dr

City
OoltewahState
TNZip Code
37363Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B4A28768AFB6F4D51A59

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Tumlin, Chloe, , ,

Mailing Address 8797 Skybrook Dr

City
OoltewahState
TNZip Code
37363Purpose of Disbursement
Campaign Worker

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B6DBB1D369CC94CB78BF

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

750.00

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)

PAGE 76 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

9.96

Transaction ID : B30C6B952E06247DAA21

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10.80

Transaction ID : BB7DD9059185D4B98838

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

24.80

Transaction ID : BB535A3D54CC5487A810

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

45.56

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

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

PAGE 77 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

19.92

Transaction ID : BE3AA48DE607B4B8DA47

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

28.97

Transaction ID : B4F8D401DF90343AE8F5

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5.79

Transaction ID : B727089F9EDA84C64B53

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

54.68

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 78 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 3212 Rainwood Dr

City
NashvilleState
TNZip Code
37217Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

27.97

Transaction ID : B293046CE809244A7892

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 3212 Rainwood Dr

City
NashvilleState
TNZip Code
37217Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

25.12

Transaction ID : B218961C5D07A475F8EA

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 3212 Rainwood Dr

City
NashvilleState
TNZip Code
37217Purpose of Disbursement
Travel

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

47.00

Transaction ID : B506F97BD69554B38968

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

100.09

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

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

PAGE 79 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

12.91

Transaction ID : B54507FF003AE4756A0F

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10.00

Transaction ID : B1F5435794D744CF194A

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

30.93

Transaction ID : B50C8988B042F41B9BBF

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

53.84

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 80 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

23.98

Transaction ID : B28FB6153E5F74F8AB04

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20.78

Transaction ID : BA43715BBA7F0443D880

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 3212 Rainwood Dr

Date of Disbursement

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

City
NashvilleState
TNZip Code
37217

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10.98

Transaction ID : B736F0AA2571C40B2A87

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

55.74

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

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

PAGE 81 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. United States Post Office

Mailing Address 501 W. Main St

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37902

FEC Identification Number

CPurpose of Disbursement
Postage

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

14.60

Transaction ID : B345E77D2559344B894F

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address 2430 Callahan Drive

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37912

FEC Identification Number

CPurpose of Disbursement
Telephone / Internet

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

231.55

Transaction ID : B3817A4D5D1CF41DDA61

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address 2430 Callahan Drive

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37912

FEC Identification Number

CPurpose of Disbursement
Telephone / Internet

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

231.53

Transaction ID : B975D48EC1B464F3B9FD

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

477.68

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

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

PAGE 82 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address 2430 Callahan Drive

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37912

FEC Identification Number

CPurpose of Disbursement
Telephone / Internet

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

231.53

Transaction ID : B293C313B51EE49409A9

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Vol Market

Mailing Address 3400 Western Ave

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37921

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6.16

Transaction ID : BBEB3DF8B8D4B4A2B8A9

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Vol Market

Mailing Address 3400 Western Ave

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37921

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

29.58

Transaction ID : B67AAD0E74AC547F68B4

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

267.27

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

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

PAGE 83 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Vol Market

Mailing Address 3400 Western Ave

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37921

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

66.50

Transaction ID : B8ABFFFC4665B4AD58D4

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Vol Market

Mailing Address 3400 Western Ave

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37921

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.49

Transaction ID : B554D230A318740F6800

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Vol Market

Mailing Address 3400 Western Ave

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37921

FEC Identification Number

CPurpose of Disbursement
Meals

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3.50

Transaction ID : B73DF4A9A8E7B4D1CAD0

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

95.49

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 84 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

47.82

Transaction ID : BFABB816A4953442F92D

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		16		2025

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

25.68

Transaction ID : B96263687EDE345AFB37

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

14.90

Transaction ID : BFD0CB5179FA14C6B969

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

88.40

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 85 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

18.68

Transaction ID : B6E8A72EA7A0E4748BB0

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

43.38

Transaction ID : B83EBC7A9D4ED42438E3

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

11.35

Transaction ID : BA32A29F8C51A43A1AA0

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

73.41

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 86 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

35.37

Transaction ID : BEFA9BE80447D4AE1AE2

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

35.10

Transaction ID : B0CA3D26E87CB47EB8E1

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

85.23

Transaction ID : BEDC8E7BFB2E145E3BD0

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

155.70

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 87 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

93.11

Transaction ID : B5FB3C30EA9D748CCA1F

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

39.01

Transaction ID : BB82127E9C166491ABB2

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

8.27

Transaction ID : BBE28C62533224446976

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

140.39

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 88 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

22.88

Transaction ID : B8E817C111E19471EB39

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

22.41

Transaction ID : BDE44D8820EE84639A99

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

102.43

Transaction ID : B11DA8E9CAEAB420DADE

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

147.72

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

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

PAGE 89 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Weigels

Mailing Address 9710 Westland Dr

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37922

FEC Identification Number

CPurpose of Disbursement
Travel

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

23.79

Transaction ID : BA84059B8C4A143CD9AE

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. WINRED

Mailing Address PO BOX 9891

Date of Disbursement

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

City
ARLINGTONState
VAZip Code
22219

FEC Identification Number

CPurpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

94.64

Transaction ID : B4271782FF12340319EE

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. WINRED

Mailing Address PO BOX 9891

Date of Disbursement

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

City
ARLINGTONState
VAZip Code
22219

FEC Identification Number

CPurpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

291.23

Transaction ID : B2FD8E657479C448D802

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

409.66

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

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

PAGE 90 OF 99

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED

Mailing Address PO BOX 9891

Date of Disbursement

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

City
ARLINGTONState
VAZip Code
22219

FEC Identification Number

CPurpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

322.12

Transaction ID : B020764933F4240F6980

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

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

322.12

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

129022.18

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

PAGE 91 OF 99

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Blount County Republican Party

Mailing Address 343 Sanderson St

City
AlcoaState
TNZip Code
37701-2427Purpose of Disbursement
Donation

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : B49F87110FC05452EA85

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Blount County Republican Party

Mailing Address 343 Sanderson St

City
AlcoaState
TNZip Code
37701-2427Purpose of Disbursement
Donation

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : B48D96F4916604CDEBD9

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Knox County GOP

Mailing Address 238 Castle Downs Lane

City
KnoxvilleState
TNZip Code
37934Purpose of Disbursement
Donation

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B25B9E33C3F964ADFA8F

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

7750.00

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)

PAGE 92 OF 99

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Rick Scarbrough for State Rep

Mailing Address 62 Royal Troon Circle

Date of Disbursement

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

City
Oak RidgeState
TNZip Code
37830

FEC Identification Number

CPurpose of Disbursement
Donation

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : B429C870E86344F4B8F5

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Volunteer Republican Women's Club

Mailing Address PO Box 52465

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37950-2465

FEC Identification Number

CPurpose of Disbursement
Donation

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

300.00

Transaction ID : B99743A7BEF284B8AA41

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Volunteer Republican Women's Club

Mailing Address PO Box 52465

Date of Disbursement

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

City
KnoxvilleState
TNZip Code
37950-2465

FEC Identification Number

CPurpose of Disbursement
Donation

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

20.00

Transaction ID : B71A23909F2A7481AB89

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

820.00

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)

PAGE 93 OF 99

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Volunteer Republican Women's Club

Mailing Address PO Box 52465

City
KnoxvilleState
TNZip Code
37950-2465Purpose of Disbursement
Donation

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : B73A822D2E8B846B6965

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

25.00

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

8595.00

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

PAGE 94 OF 99

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

NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

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

Direct Mail Processors

Nature of Debt (Purpose):

Caging and Escrow

Mailing Address 1150 Conrad Ct.

City

Hagerstown

State

MD

Zip Code

21740

Outstanding Balance Beginning This Period

1217.50

Transaction ID : DF3B643CDBD064429BCE

Amount Incurred This Period

0.00

Payment This Period

1217.50

Outstanding Balance at Close of This Period

0.00

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

Direct Mail Processors

Nature of Debt (Purpose):

Caging and Escrow

Mailing Address 1150 Conrad Ct.

City

Hagerstown

State

MD

Zip Code

21740

Outstanding Balance Beginning This Period

0.00

Transaction ID : D68776B3D756D42DCBCC

Amount Incurred This Period

1903.56

Payment This Period

1903.56

Outstanding Balance at Close of This Period

0.00

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

Direct Mail Processors

Nature of Debt (Purpose):

Caging and Escrow

Mailing Address 1150 Conrad Ct.

City

Hagerstown

State

MD

Zip Code

21740

Outstanding Balance Beginning This Period

0.00

Transaction ID : D694DE4F5AC2B4115819

Amount Incurred This Period

1082.94

Payment This Period

1082.94

Outstanding Balance at Close of This Period

0.00

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

0.00

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

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

PAGE 95 OF 99

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

NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

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

Direct Mail Processors

Nature of Debt (Purpose):

Caging and Escrow

Mailing Address 1150 Conrad Ct.

City

Hagerstown

State

MD

Zip Code

21740

Outstanding Balance Beginning This Period

0.00

Transaction ID : DFCD8B1C6CCD49658C3

Amount Incurred This Period

1203.65

Payment This Period

0.00

Outstanding Balance at Close of This Period

1203.65

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

Fulfillment Solutions Inc

Nature of Debt (Purpose):

Postage & Delivery

Mailing Address 44970 Falcon Place

City

Sterling

State

VA

Zip Code

20166

Outstanding Balance Beginning This Period

1519.72

Transaction ID : D825E019687244A2893A

Amount Incurred This Period

0.00

Payment This Period

1519.72

Outstanding Balance at Close of This Period

0.00

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

Fulfillment Solutions Inc

Nature of Debt (Purpose):

Mailshop Services

Mailing Address 44970 Falcon Place

City

Sterling

State

VA

Zip Code

20166

Outstanding Balance Beginning This Period

3913.19

Transaction ID : DD509E99E558942E7868

Amount Incurred This Period

0.00

Payment This Period

3913.19

Outstanding Balance at Close of This Period

0.00

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

1203.65

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 96 OF 99

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

NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

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

Fulfillment Solutions Inc

Nature of Debt (Purpose):

Mailshop Services

Mailing Address 44970 Falcon Place

City
SterlingState
VAZip Code
20166

Outstanding Balance Beginning This Period

0.00

Transaction ID : D71930EB7AE7644E6854

Amount Incurred This Period

1524.53

Payment This Period

1524.53

Outstanding Balance at Close of This Period

0.00

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

Fulfillment Solutions Inc

Nature of Debt (Purpose):

Mailshop Services

Mailing Address 44970 Falcon Place

City
SterlingState
VAZip Code
20166

Outstanding Balance Beginning This Period

0.00

Transaction ID : DD1EBFF56B89D4AAC8DE

Amount Incurred This Period

4817.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

4817.40

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

HSP Direct

Nature of Debt (Purpose):

Creative Program Management

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

2260.00

Transaction ID : D1FDED3FCA2B245C9A19

Amount Incurred This Period

0.00

Payment This Period

2260.00

Outstanding Balance at Close of This Period

0.00

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

4817.40

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 97 OF 99

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

NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

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

HSP Direct

Nature of Debt (Purpose):

Creative Program Management

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

263.29

Transaction ID : D9FFF81B203DE4566B16

Amount Incurred This Period

0.00

Payment This Period

263.29

Outstanding Balance at Close of This Period

0.00

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

HSP Direct

Nature of Debt (Purpose):

Creative Program Management

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

0.00

Transaction ID : DA106D937F0E24C60A81

Amount Incurred This Period

306.34

Payment This Period

306.34

Outstanding Balance at Close of This Period

0.00

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

HSP Direct

Nature of Debt (Purpose):

Creative Program Management

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

0.00

Transaction ID : D95AA99D7BA6142C0A13

Amount Incurred This Period

2529.39

Payment This Period

0.00

Outstanding Balance at Close of This Period

2529.39

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

2529.39

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 98 OF 99

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

NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

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

OnPoint Data Strategy

Nature of Debt (Purpose):

Mail List Processing

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

25.71

Transaction ID : DFC5F2FA643BF490DADF

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

25.71

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

OnPoint Data Strategy

Nature of Debt (Purpose):

Mail List Processing

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

1671.68

Transaction ID : D9B692DE826B54680996

Amount Incurred This Period

0.00

Payment This Period

1671.68

Outstanding Balance at Close of This Period

0.00

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

OnPoint Data Strategy

Nature of Debt (Purpose):

Mail List Processing

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

666.40

Transaction ID : DC0D5D46A78F14F859CB

Amount Incurred This Period

0.00

Payment This Period

666.40

Outstanding Balance at Close of This Period

0.00

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

25.71

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 99 OF 99

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

NAME OF COMMITTEE (In Full)

BURCHETT FOR CONGRESS

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

OnPoint Data Strategy

Nature of Debt (Purpose):

Mail List Processing

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

0.00

Transaction ID : D54A164CA32D44BB3A8C

Amount Incurred This Period

440.00

Payment This Period

440.00

Outstanding Balance at Close of This Period

0.00

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

OnPoint Data Strategy

Nature of Debt (Purpose):

Mail List Processing

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

0.00

Transaction ID : D508DEA5476AA4A94A20

Amount Incurred This Period

937.45

Payment This Period

937.45

Outstanding Balance at Close of This Period

0.00

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

OnPoint Data Strategy

Nature of Debt (Purpose):

Mail List Processing

Mailing Address 20130 Lakeview Center Plaza
Suite 300City
AshburnState
VAZip Code
20147

Outstanding Balance Beginning This Period

0.00

Transaction ID : D21258A8052654490991

Amount Incurred This Period

1477.53

Payment This Period

0.00

Outstanding Balance at Close of This Period

1477.53

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

1477.53

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

10053.68

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

0.00

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

10053.68