

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

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

MCCLINTOCK FOR CONGRESS

ADDRESS (number and street)

P.O. Box 850

Check if different  
than previously  
reported. (ACC)

WILTON

CA

95693

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00446815

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

CA

05

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 Copp, Vona L., , ,

Signature of Treasurer

Copp, Vona 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

**MCCLINTOCK 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)) ....	105168.69	177836.12
(b) Total Contribution Refunds (from Line 20(d)) .....	174.00	174.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	104994.69	177662.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	148646.49	314218.22
(b) Total Offsets to Operating Expenditures (from Line 14) .....	465.48	491.48
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	148181.01	313726.74
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	85299.69	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	3206.04	

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

MCCLINTOCK FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

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

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

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

65900.00

131725.00

(ii) Unitemized .....

23768.69

28086.12

(iii) TOTAL of contributions  
from individuals ▶

89668.69

159811.12

(b) Political Party Committees.....

0.00

0.00

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

15500.00

18025.00

(d) The Candidate .....

0.00

0.00

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

105168.69

177836.12

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.) .....

465.48

491.48

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

0.00

0.00

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

105634.17

178327.60

# **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.....	148646.49	314218.22
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 .....	174.00	174.00
(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)).....	174.00	174.00
21. OTHER DISBURSEMENTS .....	0.00	2000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	148820.49	316392.22

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	128486.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	105634.17
25. SUBTOTAL (add Line 23 and Line 24).....	234120.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	148820.49
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	85299.69

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

PAGE 5 OF 96

<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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

VISCO, FRANK, , ,

**A.**

Mailing Address PO BOX 5570

City

LANCASTER

State

CA

Zip Code

93539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VISCO FINANCIAL INSURANCE SERVICES

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	4		0	1		2	0	2	5

Transaction ID : IA172972

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROSE, SHARON, , MS.,

**B.**

Mailing Address 3844 MARIAH LN

City

PLACERVILLE

State

CA

Zip Code

95667

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2025

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : IA172973

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RIGHEIMER, JAMES, , ,

**C.**

Mailing Address 3050 CAPRI LN

City

COSTA MESA

State

CA

Zip Code

92626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARBOR CAPITAL PARTNERS

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	4		0	9		2	0	2	5

Transaction ID : IA173022

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 96

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BANISTER, SCOTT, , MR.,**

**A.**

Mailing Address PO BOX 997

City

HALF MOON BAY

State

CA

Zip Code

94019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : DA2214

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**WINRED**

**B.**

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6077.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 16 2025

Transaction ID : IA173061IDTA2214

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**CATE, HENRY, , MR.,**

**C.**

Mailing Address 6708 LANDERWOOD LN

City

SAN JOSE

State

CA

Zip Code

95120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : DA2213

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : DA2214

EARMARKED THROUGH WINRED

Form/Schedule: SA11AI  
Transaction ID: IA173061IDTA2214

TOTAL EARMARKED BY CONDUIT. PAC LIMIT NOT AFFECTED.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : DA2213

EARMARKED THROUGH WINRED

Form/Schedule:  
Transaction ID:



# **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 9 OF 96

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

A. Mailing Address P.O. BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6077.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 16 2025

Transaction ID : IA173061IDTA2213

Amount of Each Receipt this Period

50.00

☒ Memo Item

Full Name (Last, First, Middle Initial)  
WEISZ, BYRON, , MR.,

B. Mailing Address 9754 E LUBELL LN

City  
ACAMPO

State  
CA

Zip Code  
95220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

CEN-CAL FIRE SYSTEMS, INC.

FIRE PROTECTION CONTRACTOR

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 17 2025

Transaction ID : IA173031

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
CROSBY, ANNE, ,

C. Mailing Address 15415 RIDGEWOOD DR

City  
SONORA

State  
CA

Zip Code  
95370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : IA173039

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

4000.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : IA173061IDTA2213

TOTAL EARMARKED BY CONDUIT. PAC LIMIT NOT AFFECTED.

Form/Schedule:

Transaction ID:

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

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<input checked="" type="checkbox"/> 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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CROSBY, TOM, , MR.,

**A.**

Mailing Address 15415 RIDGEWOOD DR

City  
SONORAState  
CAZip Code  
95370FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
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  
04 24 2025

Transaction ID : IA173037

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CRUM, NATHAN, , ,

**B.**

Mailing Address 152 FRANK WEST CIR

City  
STOCKTONState  
CAZip Code  
95208FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VALLEY PACIFICOccupation  
EXECUTIVE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : IA173040

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAVIS, LONNY, , ,

**C.**

Mailing Address 1878 E HATCH RD

City  
MODESTOState  
CAZip Code  
95351FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAVIS GUEST HOMESOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : IA173047

Amount of Each Receipt this Period

2000.00

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

6000.00

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

PAGE 12 OF 96

<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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GEMPERLE, MICHAEL, , ,

**A.**

Mailing Address 1134 SIERRA DR

City

TURLOCK

State

CA

Zip Code

95380

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GEMPERLE ENTERPRISES

Occupation

PARTNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : IA173048

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

R DOORNENBAL DAIRY

**B.**

Mailing Address PO BOX 37

City

ESCALON

State

CA

Zip Code

95320

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SOLE PROPRIETOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : IA173046

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REED, JEFFREY, , ,

**C.**

Mailing Address 4093 ORCHARD CANYON LN

City

VACAVILLE

State

CA

Zip Code

95688

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REED FAMILY COMPANIES

Occupation

PRESIDENT/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  
04 25 2025

Transaction ID : IA173049

Amount of Each Receipt this Period

2000.00

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

6000.00

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

PAGE 13 OF 96

<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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

REED, MARGARET, , ,

**A.**

Mailing Address 4093 ORCHARD CANYON LN

City

VACAVILLE

State

CA

Zip Code

95688

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : IA173050

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WEISENFLUH, DONALD, , ,

**B.**

Mailing Address 903 KENSINGTON PL

City

PETALUMA

State

CA

Zip Code

94954

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173043

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BROWN, TERRANCE, , ,

**C.**

Mailing Address 320 LOS SANTOS DR

City

BODEGA BAY

State

CA

Zip Code

94923

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOR CAL MEDICAL

Occupation

SUPERVISOR

Receipt For: 2025

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173053

Amount of Each Receipt this Period

500.00

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

2600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
MA, DALE, , ,

**A.** Mailing Address 2787 VERNAZZA DR

City  
LIVERMORE

State  
CA

Zip Code  
94550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173070

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
MENDLIN, ANDREW, , ,

**B.** Mailing Address 4313 SAVOIE CT

City  
MODESTO

State  
CA

Zip Code  
95356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CURTIS LEGAL GROUP

Occupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173071

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
DAVIS, THOMAS, , ,

**C.** Mailing Address 2213 ARYNESS DR

City  
VIENNA

State  
VA

Zip Code  
22181

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOLLAND AND KNIGHT

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  
05 06 2025

Transaction ID : IA173072

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)..... ▶

800.00

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

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

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HUNTER, KENNETH, , MR.,

**A.**

Mailing Address 1444 ROLLING HILLS RD

City

SANTA YNEZ

State

CA

Zip Code

93460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SENSORIO

Occupation  
OWNER/MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : IA173085

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KLINGLER, WILLI, , MR.,

**B.**

Mailing Address 417 E OAK AVE

City

EL SEGUNDO

State

CA

Zip Code

90245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173081

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NOONAN, JOHN, , DR.,

**C.**

Mailing Address 19651 GLEN UNA DR

City

SARATOGA

State

CA

Zip Code

95070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173086

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)..... ▶

4050.00

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

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

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STRACENER, WARREN, , MR.,

**A.** Mailing Address 4190 HENSLEY CIR

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EL DORADO COUNTY

Occupation

JUDGE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : IA173090

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STRACENER, WARREN, , MR.,

**B.** Mailing Address 4190 HENSLEY CIR

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EL DORADO COUNTY

Occupation

JUDGE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : IA173088

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STRACENER, WARREN, , MR.,

**C.** Mailing Address 4190 HENSLEY CIR

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EL DORADO COUNTY

Occupation

JUDGE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : IA173091

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00



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

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

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STRACENER, WARREN, , MR.,

**A.** Mailing Address 4190 HENSLEY CIR

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EL DORADO COUNTY

Occupation

JUDGE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : IA173089

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LUJAN, JASON, , M.D.

**B.** Mailing Address 4630 E TALMADGE DR

City

SAN DIEGO

State

CA

Zip Code

92116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ANEST. SERVICE MEDICAL GROUP

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173130

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HART, LORENZ, ,

**C.** Mailing Address 175 BASALT DR

City

FREDERICKSBURG

State

VA

Zip Code

22206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARTCO STRATEGIES

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173132

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 RECEIPTS**

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BANISTER, SCOTT, , MR.,**

**A.**

Mailing Address PO BOX 997

City

HALF MOON BAY

State

CA

Zip Code

94019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : DA2217

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**WINRED**

**B.**

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6077.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 16 2025

Transaction ID : IA173413IDTA2217

Amount of Each Receipt this Period

100.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**CATE, HENRY, , MR.,**

**C.**

Mailing Address 6708 LANDERWOOD LN

City

SAN JOSE

State

CA

Zip Code

95120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : DA2216

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

150.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : DA2217

TRANSFER FROM WINRED

Form/Schedule: SA11AI  
Transaction ID: IA173413IDTA2217

TRANSFER EARMARKED FUNDS, PAC LIMIT NOT AFFECTED

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : DA2216

TRANSFER FROM WINRED

Form/Schedule:  
Transaction ID:

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**WINRED****A.** Mailing Address P.O. BOX 9891City  
**ARLINGTON**State  
**VA**Zip Code  
**22219**FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6077.00

Date of Receipt

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

Transaction ID : IA173413IDTA2216

Amount of Each Receipt this Period

50.00

☒ Memo ItemFull Name (Last, First, Middle Initial)  
**POIMIROO, JOHN, , MR.,****B.** Mailing Address 1448 CROCKER DRCity  
**EL DORADO HILLS**State  
**CA**Zip Code  
**95762**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

POIMIROO &amp; PARTNERS

MARKETING COMMUNICATIONS

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	5		2	0	2	5

Transaction ID : IA173137

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
**Abraham, JONES, , MR., JR.****C.** Mailing Address 3535 SOPHIA WAYCity  
**SACRAMENTO**State  
**CA**Zip Code  
**95820**FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173233

Amount of Each Receipt this Period

100.00

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

1100.00

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

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : IA173413IDTA2216

TRANSFER EARMARKED FUNDS, PAC LIMIT NOT AFFECTED

Form/Schedule:  
Transaction ID:

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

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

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AGUA CALIENTE BAND OF CAHUILLA, , , ,**

**A.**

Mailing Address 5401 DINAH SHORE DR

City

PALM SPRINGS

State

CA

Zip Code

92264

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AGUA CALIENTE BAND OF CAHUILLA IND.

Occupation

INDIAN TRIBE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : IA173191

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CHOUDHRY, JEFF, , ,**

**B.**

Mailing Address PO BOX 1

City

MOLINE

State

IL

Zip Code

61266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT PROVIDED

Occupation

NOT PROVIDED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173243

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**COLLIN, KENNETH, , MR.,**

**C.**

Mailing Address 2972 SAILOR AVE

City

VENTURA

State

CA

Zip Code

93001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173271

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)..... ▶

4250.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DREW, GERALDINE, , MRS.,

**A.**

Mailing Address 4179 E 3RD AVE

City  
NAPAState  
CAZip Code  
94558FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173211

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FENOLIO, DAVID, , MR.,

**B.**

Mailing Address PO BOX 787

City  
NEWCASTLEState  
CAZip Code  
95658FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173183

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GIBSON, JOSEPH, , MR.,

**C.**

Mailing Address 5040 GLENBROOK TER NW

City  
WASHINGTONState  
DCZip Code  
20016FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
THE GIBSON GROUP, LLC.

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173240

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)..... ▶

1250.00
---------



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

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

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ISAACS, JAMES, , MR.,

**A.**

Mailing Address 220 CLARK DR

City

SAN MATEO

State

CA

Zip Code

94402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CYARA

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173221

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MIS, MARK, , ,

**B.**

Mailing Address 3616 HILL ST

City

FAIRFAX

State

VA

Zip Code

22030

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT PROVIDED

Occupation

NOT PROVIDED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173242

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REBANE, JO ANN, , MRS.,

**C.**

Mailing Address 10832 CEMENT HILL RD

City

NEVADA CITY

State

CA

Zip Code

95959

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : IA173217

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

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

2000.00

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STAUFFER, ALICE, , MRS.,

**A.**

Mailing Address 2201 N VICTORIA DR

City  
SANTA ANAState  
CAZip Code  
92706FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173172

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WEISENFLUH, DONALD, , ,

**B.**

Mailing Address 903 KENSINGTON PL

City  
PETALUMAState  
CAZip Code  
94954FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173231

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HARN, JOE, , MR.,

**C.**

Mailing Address 3340 ROLLS DR

City  
CAMERON PARKState  
CAZip Code  
95682FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EL DORADO COUNTYOccupation  
AUDITOR-CONTROLLER

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 25 2025

Transaction ID : IA173302

Amount of Each Receipt this Period

250.00

☐ Memo Item

600.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Abraham, JONES, , MR., JR.

**A.**

Mailing Address 3535 SOPHIA WAY

City

SACRAMENTO

State

CA

Zip Code

95820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173379

Amount of Each Receipt this Period

200.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CRAWFORD, TERRY, , ,

Mailing Address 1668 MASON HILL RD

City

ATLANTA

State

GA

Zip Code

30329

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INITIALVIEW

Occupation

CEO

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

Transaction ID : DA2218

Amount of Each Receipt this Period

1500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6077.00

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 : IA173415IDTA2218

Amount of Each Receipt this Period

1500.00

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

1700.00

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

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : DA2218

TRANSFER FROM WINRED

Form/Schedule: SA11AI  
Transaction ID: IA173415IDTA2218

TRANSFER FROM CONDUIT, PAC LIMIT NOT AFFECTED

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KLATT, THOMAS, , MR.,

**A.**

Mailing Address 568 IDLEWOOD CT

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173345

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WARREN, JUDITH, , MRS.,

**B.**

Mailing Address 1036 E HOWARD ST

City

PASADENA

State

CA

Zip Code

91104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173401

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WEBB, WILLIAM, , MR. & MRS.,

**C.**

Mailing Address 6277 WESTERN SIERRA WAY

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173381

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)..... ▶

800.00

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

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<input checked="" type="checkbox"/> 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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

CASEY, MICHAEL, , MR.,

**A.**

Mailing Address 1111 W EL CAMINO REAL STE 109

City

SUNNYVALE

State

CA

Zip Code

94087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INTEL

Occupation

ENGINEER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : IA173418

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HARNER, STEPHEN, , MR.,

**B.**

Mailing Address 5575 ALLRED RD

City

MARIPOSA

State

CA

Zip Code

95338

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : IA173437

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HAYDEN, MARILYN, , MRS.,

**C.**

Mailing Address 10306 E CALLE DE LAS BRISAS

City

SCOTTSDALE

State

AZ

Zip Code

85255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173436

Amount of Each Receipt this Period

500.00

☐ Memo Item

5500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BAKER, JOHN, , MR.,

**A.**

Mailing Address 1101 VIA GOLETA

City

PALOS VERDES ESTAT

State

CA

Zip Code

90274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US MANAGERS REALTY, INC.

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : IA173463

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COPPEDGE, TIMOTHY, , MR.,

**B.**

Mailing Address 1413 RIVER OAKS DR

City

MODESTO

State

CA

Zip Code

95356

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BCI

Occupation

MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173464

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DODDRIDGE, WILLIAM, , MR.,

**C.**

Mailing Address 15732 TUSTIN VILLAGE WAY

City

TUSTIN

State

CA

Zip Code

92780

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GOLDENWEST DIAMOND CORP

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : IA173448

Amount of Each Receipt this Period

1000.00

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

1800.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PAYNTER, DAVID, , ,

**A.**

Mailing Address 1861 SHARON LN

City

SANTA ANA

State

CA

Zip Code

92705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PAYNTER REALTY &amp; INVESTMENTS, INC.

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : IA173524

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAYNTER, ROBYN, , ,

**B.**

Mailing Address 1861 SHARON LN

City

SANTA ANA

State

CA

Zip Code

92705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : IA173525

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WEISENFLUH, DONALD, , ,

**C.**

Mailing Address 903 KENSINGTON PL

City

PETALUMA

State

CA

Zip Code

94954

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173515

Amount of Each Receipt this Period

100.00

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

7100.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

BAKER, JOHN, , MR.,

**A.**

Mailing Address 1101 VIA GOLETA

City

PALOS VERDES ESTAT

State

CA

Zip Code

90274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US MANAGERS REALTY, INC.

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID : IA173542

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BARONA BAND OF MISSION INDIANS

**B.**

Mailing Address 1095 BARONA RD

City

LAKESIDE

State

CA

Zip Code

92040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BARONA BAND OF MISSION INDIANS

Occupation

INDIAN TRIBE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : IA173551

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ERICKSON, TIM & BETTE, , ,

**C.**

Mailing Address PO BOX 307

City

LA JUNTA

State

CO

Zip Code

81050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CATTLE RANCHER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173575

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)..... ▶

1800.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GOETSCH, KATHLEEN, , ,

**A.**

Mailing Address 48383 ROAD 620

City

OAKHURST

State

CA

Zip Code

93644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173565

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KAMINS, DOROTHY, , MRS.,

**B.**

Mailing Address 135 COPLEY PL

City

BEVERLY HILLS

State

CA

Zip Code

90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOUSEWIFE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173573

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KLINGLER, WILLI, , MR.,

**C.**

Mailing Address 417 E OAK AVE

City

EL SEGUNDO

State

CA

Zip Code

90245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173563

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STRACENER, WARREN, , MR.,

**A.** Mailing Address 4190 HENSLEY CIR

City

EL DORADO HILLS

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EL DORADO COUNTY

Occupation

JUDGE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : IA173553

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WAYTE, LAWRENCE, , ,

**B.** Mailing Address 6730 N DOLORES AVE

City

FRESNO

State

CA

Zip Code

93711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173557

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CATE, HENRY, , MR.,

**C.** Mailing Address 6708 LANDERWOOD LN

City

SAN JOSE

State

CA

Zip Code

95120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : DA2221

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

350.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : DA2221

Earmarked through WinRed PAC.

Form/Schedule:  
Transaction ID:

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

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<input checked="" type="checkbox"/> 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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINRED

**A.**

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6077.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	5

Transaction ID : IA173646IDTA2221

Amount of Each Receipt this Period

50.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

BANISTER, SCOTT, , MR.,

Mailing Address PO BOX 997

City

HALF MOON BAY

State

CA

Zip Code

94019

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

Name of Employer

Occupation

NONE

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	5

Transaction ID : DA2220

Amount of Each Receipt this Period

100.00



Memo Item

**C.**

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6077.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	5

Transaction ID : IA173646IDTA2220

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)..... ▶

100.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : IA173646IDTA2221

Total earmarked through conduit. PAC limit not affected.

Form/Schedule: SA11AI  
Transaction ID: DA2220

Earmarked through WinRed PAC.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : IA173646IDTA2220

Total earmarked through conduit. PAC limit not affected.

Form/Schedule:  
Transaction ID:

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

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<input checked="" type="checkbox"/> 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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ALHOUSE, BARBARA, , MRS.,

**A.** Mailing Address 620 SAND HILL RD APT 412ECity  
PALO ALTOState  
CAZip Code  
94304FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173616

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GOMES, CHARLES &amp; SUSAN, , MRS.,

**B.** Mailing Address 2053 RIESLING WAYCity  
CAMERON PARKState  
CAZip Code  
95682FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173619

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ROWE, JAMES, , MR.,

**C.** Mailing Address 516 MONTECITO CTCity  
EL DORADO HILLSState  
CAZip Code  
95762FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : IA173601

Amount of Each Receipt this Period

300.00

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

800.00

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



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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SERIO, PATRICIA, , MS,

**A.**

Mailing Address 20134 E DAMERAL DR

City

COVINA

State

CA

Zip Code

91724

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173611

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHOE, YONG, , ,

**B.**

Mailing Address 45 SUTTON SQUARE SW #806

City

WASHINGTON

State

DC

Zip Code

20024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YC CONSULTING, LLC.

Occupation

CONSULTING

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173626

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ASHWILL, BARBARA, , ,

**C.**

Mailing Address 3161 CAMERON PARK DR STE 205

City

CAMERON PARK

State

CA

Zip Code

95682

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NOT PROVIDED

Occupation

NOT PROVIDED

Receipt For: 2026

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173699

Amount of Each Receipt this Period

500.00

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

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

COLE, ROBERT, , MR.,

**A.**

Mailing Address 75 TELOMA DR

City

VENTURA

State

CA

Zip Code

93003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173629

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAPSLEY, ROBERT, ,

**B.**

Mailing Address 8880 CREEKSTONE CIR

City

ROSEVILLE

State

CA

Zip Code

95747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CA BUSINESS ROUNDTABLE

Occupation

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 Y  
06 30 2025

Transaction ID : IA173652

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORONGO BAND OF MISSION INDIAN, ., .,

**C.**

Mailing Address 12700 PUMARRA RD

City

BANNING

State

CA

Zip Code

92220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MORONGO BAND OF MISSION INDIANS

Occupation

INDIAN TRIBE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

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

Transaction ID : IA173701

Amount of Each Receipt this Period

3300.00

☐ Memo Item

3800.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

PARKES, DAYLE, , MR.,

**A.**

Mailing Address 3400 PAUL SWEET RD UNIT A207

City

SANTA CRUZ

State

CA

Zip Code

95065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : IA173636

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STOCK, VIRGINIA, , ,

**B.**

Mailing Address 1320 MONUMENT ST

City

PACIFIC PALISADES

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : IA173702

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ZEIDERMAN, ARNOLD, , DR., M.D.

**C.**

Mailing Address 13250 SHAKE RIDGE RD

City

SUTTER CREEK

State

CA

Zip Code

95685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : IA173700

Amount of Each Receipt this Period

1000.00

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

3250.00

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

65900.00

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSN. OF INS. & FINANCIAL ADVISORS****A.** Mailing Address 2901 TELKESTAR CT

City

FALLS CHURCH

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.**C** C00005249

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  
04 / 02 / 2025

02

2025

Transaction ID : IA173094

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
**AICPA PAC - AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC**  
Mailing Address 220 LEIGH FARM RD

City

DURHAM

State

NC

Zip Code

27707

FEC ID number of contributing  
federal political committee.**C** C00077321

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

09

2025

Transaction ID : IA173092

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
**AMERICA'S ELECTRIC COOPERATIVES PAC**  
Mailing Address 4301 WILSON BLVD

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2026

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

09

2025

Transaction ID : IA173093

Amount of Each Receipt this Period

1000.00

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

5500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MASTERCARD INTERNATIONAL INC EMPL. PAC****A.**

Mailing Address 1401 I ST NW STE 1030

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00410274

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : IA173241

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**PG & E CORPORATION ENERGY PAC****B.**

Mailing Address 300 LAKESIDE DR STE 210

City

OAKLAND

State

CA

Zip Code

94612

FEC ID number of contributing  
federal political committee.**C** C00177469

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : IA173234

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**CIPAC FEDERAL PAC****C.**

Mailing Address 9070 IRVINE CENTER DR STE 150

City

IRVINE

State

CA

Zip Code

92618

FEC ID number of contributing  
federal political committee.**C** C00318766

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

Transaction ID : IA173684

Amount of Each Receipt this Period

2000.00

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

4000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICA'S ELECTRIC COOPERATIVES PAC****A.** Mailing Address 4301 WILSON BLVDCity  
ARLINGTONState  
VAZip Code  
22203FEC ID number of contributing  
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : IA173705

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.** CALIFORNIA POULTRY FEDERATION FED. PAC

Mailing Address 4640 SPYRES WAY STE 4

City  
MODESTOState  
CAZip Code  
95356FEC ID number of contributing  
federal political committee.**C** C00296269

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : IA173706

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.** DELAWARE NORTH COMPANIES, INC. PAC

Mailing Address 250 DELAWARE AVE

City  
BUFFALOState  
NYZip Code  
14202FEC ID number of contributing  
federal political committee.**C** C00532887

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : IA173686

Amount of Each Receipt this Period

2000.00

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

4500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THE ASCAP LEGISLATIVE FUND FOR THE ARTS****A.**

Mailing Address 250 W 57TH ST

City  
NEW YORKState  
NYZip Code  
10107FEC ID number of contributing  
federal political committee.**C** C00228296

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID : IA173685

Amount of Each Receipt this Period

1500.00

☐ Memo Item**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

Amount of Each Receipt this Period

☐ Memo Item**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

Amount of Each Receipt this Period

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

1500.00

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

1500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

**A.**

Mailing Address P. O. BOX 53852

City  
PHOENIX

State  
AZ

Zip Code  
85072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

382.07

Date of Receipt

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

Transaction ID : IA173098

Amount of Each Receipt this Period

382.07

☐ Memo Item

VOID DUPLICATE PAYMENT

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

382.07

382.07



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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address P.O. BOX 5014

Date of Disbursement

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

City  
CAROL STREAMState  
ILZip Code  
60197

FEC Identification Number

**C**Purpose of Disbursement  
PHONE SVC.

001

Amount of Each Disbursement this Period

149.59

Transaction ID : EB173103

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95816

FEC Identification Number

**C**Purpose of Disbursement  
MERCHANT FEE

001

Amount of Each Disbursement this Period

50.50

Transaction ID : EB172970

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. VOTE RITE SYSTEMS, INC.**

Mailing Address 2934 GOLD PAN CT. #20

Date of Disbursement

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

City  
RANCHO CORDOVAState  
CAZip Code  
95670

FEC Identification Number

**C**Purpose of Disbursement  
DATA PROCESSING

001

Amount of Each Disbursement this Period

293.30

Transaction ID : EB172926

☐ Memo Item

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:

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

493.39

**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 50 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEES

001

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:

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

50.50

Transaction ID : EB172975

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address P.O. BOX 5014

City  
CAROL STREAMState  
ILZip Code  
60197Purpose of Disbursement  
PHONE SVC.

001

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:

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

160.50

Transaction ID : EB173104

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

50.50

Transaction ID : EB172976

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

261.50

**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 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. MAILCHIMP.COM**

Mailing Address 512 MEANS ST. #404

City  
ATLANTAState  
GAZip Code  
30318Purpose of Disbursement  
E-MAIL SVC.

004

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:

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

300.00

Transaction ID : EB173105

☐ Memo Item**B. STATE COMPENSATION INSURANCE FUND**

Mailing Address P. O. BOX 748170

City  
LOS ANGELESState  
CAZip Code  
90074Purpose of Disbursement  
INSURANCE

001

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:

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

330.41

Transaction ID : EB172974

☐ Memo Item**C. STORE & GO**

Mailing Address 21 MASSIE CT.

City  
SACRAMENTOState  
CAZip Code  
95828Purpose of Disbursement  
STORAGE

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

175.00

Transaction ID : EB173107

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

805.41

**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)

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. THE TOWNSEND GROUP**

Mailing Address 2308 MT. VERNON AVE. #707

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
FUNDRAISING CONSULTING

003

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:

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

2000.00

Transaction ID : EB173010

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

50.50

Transaction ID : EB173023

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PUBLIC STORAGE**

Mailing Address 715 CIRBY WAY

City  
ROSEVILLEState  
CAZip Code  
95678Purpose of Disbursement  
STORAGE

001

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:

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

123.00

Transaction ID : EB173110

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

2173.50

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

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

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<input checked="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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EMPLOYMENT DEVELOPMENT DEPT.**

Mailing Address P. O. BOX 826276

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
94230

FEC Identification Number

**C**Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

235.95

Transaction ID : EB173027

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. GEORGE, CHARLA, , ,**

Mailing Address 4520 SHARI WAY

Date of Disbursement

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

City  
GRANITE BAYState  
CAZip Code  
95746

FEC Identification Number

**C**Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1732.56

Transaction ID : EB173024

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. HUEY, JON, , MR.,**

Mailing Address PO BOX 1198

Date of Disbursement

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

City  
ROCKLINState  
CAZip Code  
95677

FEC Identification Number

**C**Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3867.82

Transaction ID : EB173025

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

5836.33

**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 54 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SVC.**

Mailing Address .

Date of Disbursement

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

City  
OGDENState  
UTZip Code  
84201

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1699.17

Transaction ID : EB173026

☐ 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. METRO PCS**

Mailing Address 1420 E. ROSEVILLE PKWY

Date of Disbursement

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

City  
ROSEVILLEState  
CAZip Code  
95661

FEC Identification Number

C

Purpose of Disbursement  
PHONE SVC.

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

147.00

Transaction ID : EB173111

☐ 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. PAYCHEX**

Mailing Address 50 IRON POINT CIR. #200

Date of Disbursement

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

City  
FOLSOMState  
CAZip Code  
95630

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL SVC.

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

100.17

Transaction ID : EB173028

☐ 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).....▶

1946.34

**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 55 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST. SE

City  
WASHINGTONState  
DCZip Code  
20006Purpose of Disbursement  
MEETING

001

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

150.76

Transaction ID : EB173113

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD. #530

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEE

001

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5.91

Transaction ID : EB173060

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HYATT PLACE FRESNO**

Mailing Address 7333 N. FRESNO ST.

City  
FRESNOState  
CAZip Code  
93720Purpose of Disbursement  
LODGING

002

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:

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

279.50

Transaction ID : EB173114

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

436.17

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

100.50

Transaction ID : EB173032

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BAUER, DAVID, , ,**

Mailing Address 9458 TREELAKE RD

City  
GRANITE BAYState  
CAZip Code  
95746Purpose of Disbursement  
COMPLIANCE REPORTING

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : EB173033

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITAL DEVELOPMENT STRATEGIES**

Mailing Address 1127 11TH ST. #226

City  
SACRAMENTOState  
CAZip Code  
95814Purpose of Disbursement  
FUNDRAISING CONSULTING

003

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : EB173034

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

600.50

**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 57 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EDH WATERFRONT LLC**

Mailing Address 4364 TOWN CENTER BLVD. #310

City  
EL DORADO HILLSState  
CAZip Code  
95762Purpose of Disbursement  
RENT

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3253.16

Transaction ID : EB173035

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD. #530

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEE

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.99

Transaction ID : EB173063

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BISTRO 234**

Mailing Address 234 E. MAIN ST.

City  
TURLOCKState  
CAZip Code  
95380Purpose of Disbursement  
FUNDRAISING EVENT

003

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1637.11

Transaction ID : EB173117

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

4891.26

**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 58 OF 96

<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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TRAILHEAD STRATEGIC COMMUNICATIONS**

Mailing Address 35311 N. 92ND WAY

City  
SCOTTSDALEState  
AZZip Code  
85262Purpose of Disbursement  
MASS MAIL

004

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

38512.00

Transaction ID : EB173044

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2027

☒ Primary ☐ General  
☐ 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

102.25

Transaction ID : EB173051

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2027

☒ Primary ☐ General  
☐ 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

200.50

Transaction ID : EB173052

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

38814.75

**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 59 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. HOUSE GIFT SHOP**

Mailing Address HOUSE OF REPRESENTATIVES

City  
WashingtonState  
DCZip Code  
20515Purpose of Disbursement  
GIFTS FOR FUNDRAISER

003

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:

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

160.65

Transaction ID : EB173118

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

1.00

Transaction ID : EB173096

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

25.50

Transaction ID : EB173097

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

187.15

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EMPLOYMENT DEVELOPMENT DEPT.**

Mailing Address P. O. BOX 826276

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
94230

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

235.95

Transaction ID : EB173058

☐ 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. GEORGE, CHARLA, , ,**

Mailing Address 4520 SHARI WAY

Date of Disbursement

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

City  
GRANITE BAYState  
CAZip Code  
95746

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1732.56

Transaction ID : EB173056

☐ 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. HUEY, JON, , MR.,**

Mailing Address PO BOX 1198

Date of Disbursement

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

City  
ROCKLINState  
CAZip Code  
95677

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3867.81

Transaction ID : EB173055

☐ 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).....▶

5836.32

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SVC.**

Mailing Address .

Date of Disbursement

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

City  
OGDENState  
UTZip Code  
84201

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1699.18

Transaction ID : EB173057

☐ 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. PAYCHEX**

Mailing Address 50 IRON POINT CIR. #200

Date of Disbursement

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

City  
FOLSOMState  
CAZip Code  
95630

FEC Identification Number

C

Purpose of Disbursement  
PAYROSS SVC.

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

82.17

Transaction ID : EB173054

☐ 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. CHICK-FIL-A**

Mailing Address 4238 WILSON BLVD.

Date of Disbursement

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

City  
ArlingtonState  
VAZip Code  
22201

FEC Identification Number

C

Purpose of Disbursement  
MEETING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

390.92

Transaction ID : EB173478

☐ 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).....▶

2172.27

**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 62 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PAYPAL**

Mailing Address 2145 Hamilton Avenue

Date of Disbursement

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

City  
San JoseState  
CAZip Code  
95125

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

96.42

Transaction ID : EB173100

☐ 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. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95816

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3.00

Transaction ID : EB173293

☐ 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. STORE & GO**

Mailing Address 21 MASSIE CT.

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95828

FEC Identification Number

C

Purpose of Disbursement  
STORAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

175.00

Transaction ID : EB173482

☐ 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).....▶

274.42

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address P.O. BOX 5014

City  
CAROL STREAMState  
ILZip Code  
60197Purpose of Disbursement  
PHONE SVC.

001

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:

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

149.82

Transaction ID : EB173483

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

13.00

Transaction ID : EB173067

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE TOWNSEND GROUP**

Mailing Address 2308 MT. VERNON AVE. #707

City  
ALEXANDRIAState  
VAZip Code  
22301Purpose of Disbursement  
FUNDRAISING CONSULTING AND EXPENSES

003

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:

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

2109.85

Transaction ID : EB173064

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

2272.67

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. VOTE RITE SYSTEMS, INC.**

Mailing Address 2934 GOLD PAN CT. #20

City  
RANCHO CORDOVAState  
CAZip Code  
95670Purpose of Disbursement  
DATA PROCESSING

001

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:

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

347.80

Transaction ID : EB173065

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address P.O. BOX 5014

City  
CAROL STREAMState  
ILZip Code  
60197Purpose of Disbursement  
PHONE SVC.

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

160.50

Transaction ID : EB173484

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHASE CARD SERVICES**

Mailing Address P. O. BOX 6294

City  
CAROL STREAMState  
ILZip Code  
60197Purpose of Disbursement  
CREDIT CARD PAYMENT

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

637.93

Transaction ID : EB173069

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

1146.23

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



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

PAGE 65 OF 96

<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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address P.O. BOX 5014

Date of Disbursement

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

City  
CAROL STREAMState  
ILZip Code  
60197

FEC Identification Number

**C**Purpose of Disbursement  
PHONE SVC.

001

Amount of Each Disbursement this Period

144.70

Transaction ID : XB572EB173069

☒ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. HOUSE MEMBERS DINING ROOM**

Mailing Address HOUSE OF REPRESENTATIVES

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20005

FEC Identification Number

**C**Purpose of Disbursement  
MEETING

001

Amount of Each Disbursement this Period

37.00

Transaction ID : XB575EB173069

☒ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. HOUSE MEMBERS DINING ROOM**

Mailing Address HOUSE OF REPRESENTATIVES

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20005

FEC Identification Number

**C**Purpose of Disbursement  
MEETING

001

Amount of Each Disbursement this Period

42.00

Transaction ID : XB576EB173069

☒ Memo Item

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:

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

0.00

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

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

PAGE 66 OF 96

<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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1455 MARKET ST. #400

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

**C**Purpose of Disbursement  
CAB FARE

002

Amount of Each Disbursement this Period

19.64

Transaction ID : XB577EB173069

☒ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. NORTON SECURITY**

Mailing Address 60 E. RIO SALADO PARKWAY, STE. 100

Date of Disbursement

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

City  
TEMPEState  
AZZip Code  
85281

FEC Identification Number

**C**Purpose of Disbursement  
SOFTWARE

001

Amount of Each Disbursement this Period

199.98

Transaction ID : XB574EB173069

☒ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. UBER**

Mailing Address 1455 MARKET ST. #400

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

**C**Purpose of Disbursement  
CAB FARE

002

Amount of Each Disbursement this Period

28.93

Transaction ID : XB578EB173069

☒ Memo Item

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:

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

0.00

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

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

PAGE 67 OF 96

<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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address P.O. BOX 5014

Date of Disbursement

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

City  
CAROL STREAMState  
ILZip Code  
60197

FEC Identification Number

**C**Purpose of Disbursement  
PHONE SVC.

001

Amount of Each Disbursement this Period

144.70

Transaction ID : XB573EB173069

☒ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95816

FEC Identification Number

**C**Purpose of Disbursement  
MERCHANT FEE

001

Amount of Each Disbursement this Period

15.50

Transaction ID : EB173068

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. MAILCHIMP.COM**

Mailing Address 512 MEANS ST. #404

Date of Disbursement

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

City  
ATLANTAState  
GAZip Code  
30318

FEC Identification Number

**C**Purpose of Disbursement  
E-MAIL SVC.

004

Amount of Each Disbursement this Period

300.00

Transaction ID : EB173486

☐ Memo Item

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:

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

315.50

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

13.00

Transaction ID : EB173496

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

3.00

Transaction ID : EB173122

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

8.50

Transaction ID : EB173121

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

24.50

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

34.25

Transaction ID : EB173149

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PUBLIC STORAGE**

Mailing Address 715 CIRBY WAY

City  
ROSEVILLEState  
CAZip Code  
95678Purpose of Disbursement  
STORAGE

001

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:

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

127.00

Transaction ID : EB173489

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

13.00

Transaction ID : EB173135

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

174.25

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EMPLOYMENT DEVELOPMENT DEPT.**

Mailing Address P. O. BOX 826276

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
94230

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

235.95

Transaction ID : EB173142

☐ 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. GEORGE, CHARLA, , ,**

Mailing Address 4520 SHARI WAY

Date of Disbursement

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

City  
GRANITE BAYState  
CAZip Code  
95746

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1732.56

Transaction ID : EB173140

☐ 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. HUEY, JON, , MR.,**

Mailing Address PO BOX 1198

Date of Disbursement

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

City  
ROCKLINState  
CAZip Code  
95677

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3867.81

Transaction ID : EB173139

☐ 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).....▶

5836.32

**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 71 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SVC.**

Mailing Address .

Date of Disbursement

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

City  
OGDENState  
UTZip Code  
84201

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1699.18

Transaction ID : EB173141

☐ 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. METRO PCS**

Mailing Address 1420 E. ROSEVILLE PKWY

Date of Disbursement

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

City  
ROSEVILLEState  
CAZip Code  
95661

FEC Identification Number

C

Purpose of Disbursement  
PHONE SVC.

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

147.00

Transaction ID : EB173490

☐ 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. MONACO, INC.**

Mailing Address 1011 S. LINWOOD AVE.

Date of Disbursement

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

City  
SANTA ANAState  
CAZip Code  
92705

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

004

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2825.25

Transaction ID : EB173134

☐ 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).....▶

4671.43

**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 72 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 50 IRON POINT CIR. #200

Date of Disbursement

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

City  
FOLSOMState  
CAZip Code  
95630

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL SVC.

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

87.62

Transaction ID : EB173143

☐ 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. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST. SE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20006

FEC Identification Number

C

Purpose of Disbursement  
MEETING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

90.64

Transaction ID : EB173492

☐ 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. USPS PO BOXES ON LINE**

Mailing Address POBOXES.USPS.COM

Date of Disbursement

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

City  
CYBERSPACEState  
CAZip Code  
90000

FEC Identification Number

C

Purpose of Disbursement  
BOX RENTAL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

244.00

Transaction ID : EB173491

☐ 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).....▶

422.26

**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 73 OF 96

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD. #530

Date of Disbursement

M M	D D	Y Y Y Y
05	16	2025

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEE

001

Amount of Each Disbursement this Period

5.91

Transaction ID : EB173412

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

Date of Disbursement

M M	D D	Y Y Y Y
05	19	2025

City  
SACRAMENTOState  
CAZip Code  
95816

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEE

001

Amount of Each Disbursement this Period

50.50

Transaction ID : EB173138

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. BAUER, DAVID, , ,**

Mailing Address 9458 TREELAKE RD

Date of Disbursement

M M	D D	Y Y Y Y
05	20	2025

City  
GRANITE BAYState  
CAZip Code  
95746

FEC Identification Number

C

Purpose of Disbursement  
COMPLIANCE REPORTING

001

Amount of Each Disbursement this Period

621.60

Transaction ID : EB173146

☐ Memo Item

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:

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

678.01

**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 74 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. BRICKYARD COUNTER AND BAR**

Mailing Address 4364 TOWN CENTER BLVD.

City  
EL DORADO HILLSState  
CAZip Code  
95762Purpose of Disbursement  
MEETING

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

218.55

Transaction ID : EB173493

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MONACO, INC.**

Mailing Address 1011 S. LINWOOD AVE.

City  
SANTA ANAState  
CAZip Code  
92705Purpose of Disbursement  
MASS MAIL

004

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4684.32

Transaction ID : EB173147

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

7.51

Transaction ID : EB173148

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

4910.38

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.50

Transaction ID : EB173150

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.50

Transaction ID : EB173292

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.00

Transaction ID : EB173151

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

14.00

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. RAISING CANES**

Mailing Address 50 MASSACHUSETTS AVE. NE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20002

FEC Identification Number

C

Purpose of Disbursement  
MEETING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

178.86

Transaction ID : EB173494

☐ 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. CAPITAL DEVELOPMENT STRATEGIES**

Mailing Address 1127 11TH ST. #226

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95814

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

150.00

Transaction ID : EB173290

☐ 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. EDH WATERFRONT LLC**

Mailing Address 4364 TOWN CENTER BLVD. #310

Date of Disbursement

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

City  
EL DORADO HILLSState  
CAZip Code  
95762

FEC Identification Number

C

Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3253.16

Transaction ID : EB173291

☐ 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).....▶

3582.02

**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 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PAYPAL**

Mailing Address 2145 Hamilton Avenue

Date of Disbursement

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

City  
San JoseState  
CAZip Code  
95125

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

65.54

Transaction ID : EB173495

☐ 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 TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD. #530

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22219

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

59.10

Transaction ID : EB173414

☐ 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. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95816

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

23.75

Transaction ID : EB173411

☐ 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).....▶

148.39

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 78 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. TRAILHEAD STRATEGIC COMMUNICATIONS**

Mailing Address 35311 N. 92ND WAY

City  
SCOTTSDALEState  
AZZip Code  
85262Purpose of Disbursement  
CAMPAIGN CONSULTING

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

10500.00

Transaction ID : EB173299

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EMPLOYMENT DEVELOPMENT DEPT.**

Mailing Address P. O. BOX 826276

City  
SACRAMENTOState  
CAZip Code  
94230Purpose of Disbursement  
TAXES

001

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:

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

235.95

Transaction ID : EB173297

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GEORGE, CHARLA, , ,**

Mailing Address 4520 SHARI WAY

City  
GRANITE BAYState  
CAZip Code  
95746Purpose of Disbursement  
PAYROLL

001

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:

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

1732.55

Transaction ID : EB173294

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

12468.50

**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 96

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. HUEY, JON, , MR.,**

Mailing Address PO BOX 1198

Date of Disbursement

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

City  
ROCKLINState  
CAZip Code  
95677

FEC Identification Number

**C**Purpose of Disbursement  
PAYROLL

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3867.81

Transaction ID : EB173295

☐ 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. INTERNAL REVENUE SVC.**

Mailing Address

Date of Disbursement

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

City  
OGDENState  
UTZip Code  
84201

FEC Identification Number

**C**Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1699.19

Transaction ID : EB173296

☐ 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. PAYCHEX**

Mailing Address 50 IRON POINT CIR. #200

Date of Disbursement

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

City  
FOLSOMState  
CAZip Code  
95630

FEC Identification Number

**C**Purpose of Disbursement  
PAYROLL SVC.

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

87.62

Transaction ID : EB173298

☐ 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).....▶

5654.62

**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 80 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address P.O. BOX 5014

Date of Disbursement

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

City  
CAROL STREAMState  
ILZip Code  
60197

FEC Identification Number

C

Purpose of Disbursement  
PHONE SVC.

001

Amount of Each Disbursement this Period

149.19

Transaction ID : EB173655

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. STORE & GO**

Mailing Address 21 MASSIE CT.

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95828

FEC Identification Number

C

Purpose of Disbursement  
STORAGECategory/  
Type

Amount of Each Disbursement this Period

175.00

Transaction ID : EB173657

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. ARISTOTLE INTERNATIONAL**

Mailing Address 205 PENNSYLVANIA AVE. SE

Date of Disbursement

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

City  
WashingtonState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
SOFTWARE

001

Amount of Each Disbursement this Period

3000.00

Transaction ID : EB173658

☐ Memo Item

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:

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

3324.19

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



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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CHASE CARD SERVICES**

Mailing Address P. O. BOX 6294

City  
CAROL STREAMState  
ILZip Code  
60197Purpose of Disbursement  
CREDIT CARD PAYMENT

001

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:

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

280.09

Transaction ID : EB173441

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER**

Mailing Address 1515 3RD ST.

City  
SAN FRANCISCOState  
CAZip Code  
94103Purpose of Disbursement  
CAB FARE

002

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:

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

16.10

Transaction ID : XB579EB173441

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. HOUSE MEMBERS DINING ROOM**

Mailing Address HOUSE OF REPRESENTATIVES

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
MEETING

001

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:

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

49.00

Transaction ID : XB581EB173441

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

280.09

**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)

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 1515 3RD ST.

Date of Disbursement

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

City  
SAN FRANCISCOState  
CAZip Code  
94103

FEC Identification Number

C

Purpose of Disbursement  
CAB FARE

002

Amount of Each Disbursement this Period

19.16

Transaction ID : XB580EB173441

☒ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address P.O. BOX 5014

Date of Disbursement

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

City  
CAROL STREAMState  
ILZip Code  
60197

FEC Identification Number

C

Purpose of Disbursement  
PHONE SVC.

001

Amount of Each Disbursement this Period

144.48

Transaction ID : XB582EB173441

☒ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95816

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEE

001

Amount of Each Disbursement this Period

150.50

Transaction ID : EB173440

☐ Memo Item

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:

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

150.50

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. VOTE RITE SYSTEMS, INC.**

Mailing Address 2934 GOLD PAN CT. #20

Date of Disbursement

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

City  
RANCHO CORDOVAState  
CAZip Code  
95670

FEC Identification Number

C

Purpose of Disbursement  
DATA PROCESSING

001

Amount of Each Disbursement this Period

520.81

Transaction ID : EB173442

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL**

Mailing Address 205 PENNSYLVANIA AVE. SE

Date of Disbursement

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

City  
WashingtonState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
SOFTWARE

001

Amount of Each Disbursement this Period

3000.00

Transaction ID : EB173659

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. THE TOWNSEND GROUP**

Mailing Address 2308 MT. VERNON AVE. #707

Date of Disbursement

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

City  
ALEXANDRIAState  
VAZip Code  
22301

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING AND EXPENSES

003

Amount of Each Disbursement this Period

2294.40

Transaction ID : EB173443

☐ Memo Item

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:

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

5815.21

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address P.O. BOX 5014

Date of Disbursement

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

City  
CAROL STREAMState  
ILZip Code  
60197

FEC Identification Number

**C**Purpose of Disbursement  
PHONE SVC.

001

Amount of Each Disbursement this Period

160.50

Transaction ID : EB173656

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**B. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95816

FEC Identification Number

**C**Purpose of Disbursement  
MERCHANT FEE

001

Amount of Each Disbursement this Period

1.00

Transaction ID : EB173477

☐ Memo Item

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:

Full Name (Last, First, Middle Initial)

**C. THE WINERY**

Mailing Address 3131 WEST COAST HWY

Date of Disbursement

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

City  
NEWPORT BEACHState  
CAZip Code  
92663

FEC Identification Number

**C**Purpose of Disbursement  
FUNDRAISING EVENT

003

Amount of Each Disbursement this Period

500.00

Transaction ID : EB173663

☐ Memo Item

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:

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

661.50

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

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

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

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NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BAUER, DAVID, , ,**

Mailing Address 9458 TREELAKE RD

City  
GRANITE BAYState  
CAZip Code  
95746Purpose of Disbursement  
COMPLIANCE REPORTING

001

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:

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

855.40

Transaction ID : EB173498

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JET'S PIZZA**

Mailing Address 6 E. GLEBE ROAD

City  
ALEXANDRIAState  
VAZip Code  
22305Purpose of Disbursement  
MEETING

001

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:

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

200.80

Transaction ID : EB173662

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MAILCHIMP.COM**

Mailing Address 512 MEANS ST. #404

City  
ATLANTAState  
GAZip Code  
30318Purpose of Disbursement  
EMAIL SVC.

004

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : EB173664

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

1356.20

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.05

Transaction ID : EB173527

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL**

Mailing Address 205 PENNSYLVANIA AVE. SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
SOFTWARE

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : EB173660

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GRAZIE**

Mailing Address 310 STATE STREET

City  
North AdamsState  
MAZip Code  
01247Purpose of Disbursement  
FUNDRAISING EVENT

003

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2057.00

Transaction ID : EB173669

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

5059.05

**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 87 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PUBLIC STORAGE**

Mailing Address 715 CIRBY WAY

City  
ROSEVILLEState  
CAZip Code  
95678Purpose of Disbursement  
STORAGE

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

127.00

Transaction ID : EB173670

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL**

Mailing Address 205 PENNSYLVANIA AVE. SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
SOFTWARE

001

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:

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

3000.00

Transaction ID : EB173661

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

City  
SACRAMENTOState  
CAZip Code  
95816Purpose of Disbursement  
MERCHANT FEE

001

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:

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

3.00

Transaction ID : EB173529

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

3130.00

**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 88 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EMPLOYMENT DEVELOPMENT DEPT.**

Mailing Address P. O. BOX 826276

City  
SACRAMENTOState  
CAZip Code  
94230Purpose of Disbursement  
TAXES

001

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:

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

235.95

Transaction ID : EB173587

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GEORGE, CHARLA, , ,**

Mailing Address 4520 SHARI WAY

City  
GRANITE BAYState  
CAZip Code  
95746Purpose of Disbursement  
PAYROLL

001

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:

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

1732.56

Transaction ID : EB173585

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HUEY, JON, , MR.,**

Mailing Address PO BOX 1198

City  
ROCKLINState  
CAZip Code  
95677Purpose of Disbursement  
PAYROLL

001

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:

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

3867.82

Transaction ID : EB173584

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

5836.33

**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 89 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SVC.**

Mailing Address .

Date of Disbursement

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

City  
OGDENState  
UTZip Code  
84201

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1699.17

Transaction ID : EB173586

☐ 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. PAYCHEX**

Mailing Address 50 IRON POINT CIR. #200

Date of Disbursement

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

City  
FOLSOMState  
CAZip Code  
95630

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL SVC.

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

87.62

Transaction ID : EB173588

☐ 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. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2025

City  
SACRAMENTOState  
CAZip Code  
95816

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

10.50

Transaction ID : EB173649

☐ 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).....▶

1797.29

**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 90 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD. #530

City  
ARLINGTONState  
VAZip Code  
22219Purpose of Disbursement  
MERCHANT FEES

001

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

5.91

Transaction ID : EB173647

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. METRO PCS**

Mailing Address 1420 E. ROSEVILLE PKWY

City  
ROSEVILLEState  
CAZip Code  
95661Purpose of Disbursement  
PHONE SVC.

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

147.00

Transaction ID : EB173671

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. USPS PO BOXES ON LINE**

Mailing Address POBOXES.USPS.COM

City  
CYBERSPACEState  
CAZip Code  
90000Purpose of Disbursement  
BOX RENTAL

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

121.00

Transaction ID : EB173672

☐ Memo Item

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

273.91

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST. SE

City  
WASHINGTONState  
DCZip Code  
20006Purpose of Disbursement  
MEETING

001

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:

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

129.99

Transaction ID : EB173673

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PAYPAL**

Mailing Address 2145 Hamilton Avenue

City  
San JoseState  
CAZip Code  
95125Purpose of Disbursement  
MERCHANT FEE

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

52.33

Transaction ID : EB173645

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITAL DEVELOPMENT STRATEGIES**

Mailing Address 1127 11TH ST. #226

City  
SACRAMENTOState  
CAZip Code  
95814Purpose of Disbursement  
FUNDRAISING CONSULTING

003

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

150.00

Transaction ID : EB173625

☐ Memo Item

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

332.32

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. EDH WATERFRONT LLC**

Mailing Address 4364 TOWN CENTER BLVD. #310

City  
EL DORADO HILLSState  
CAZip Code  
95762Purpose of Disbursement  
RENT

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3253.16

Transaction ID : EB173624

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. U.S. POSTAL SVC.**

Mailing Address 2000 ROYAL OAKS DR.

City  
SACRAMENTOState  
CAZip Code  
95813Purpose of Disbursement  
PERMIT

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1020.00

Transaction ID : EB173622

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. U.S. POSTAL SVC.**

Mailing Address 2000 ROYAL OAKS DR.

City  
SACRAMENTOState  
CAZip Code  
95813Purpose of Disbursement  
PERMIT

001

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:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

350.00

Transaction ID : EB173623

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

4623.16

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

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

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

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NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. RAISING CANES**

Mailing Address 50 MASSACHUSETTS AVE. NE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20002

FEC Identification Number

C

Purpose of Disbursement  
MEETING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

256.69

Transaction ID : EB173675

☐ 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. EFUNDRAISING.COM**

Mailing Address 2831 G ST. #120

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
95816

FEC Identification Number

C

Purpose of Disbursement  
MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

38.50

Transaction ID : EB173648

☐ 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. EMPLOYMENT DEVELOPMENT DEPT.**

Mailing Address P. O. BOX 826276

Date of Disbursement

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

City  
SACRAMENTOState  
CAZip Code  
94230

FEC Identification Number

C

Purpose of Disbursement  
TAXES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

235.95

Transaction ID : EB173639

☐ 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).....▶

531.14

**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 94 OF 96

<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)

**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GEORGE, CHARLA, , ,**

Mailing Address 4520 SHARI WAY

City  
GRANITE BAYState  
CAZip Code  
95746Purpose of Disbursement  
PAYROLL

001

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:

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

1732.56

Transaction ID : EB173643

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HUEY, JON, , MR.,**

Mailing Address PO BOX 1198

City  
ROCKLINState  
CAZip Code  
95677Purpose of Disbursement  
PAYROLL

001

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:

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

3867.81

Transaction ID : EB173644

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERNAL REVENUE SVC.**

Mailing Address .

City  
OGDENState  
UTZip Code  
84201Purpose of Disbursement  
TAXES

001

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:

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

1699.18

Transaction ID : EB173640

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

7299.55

**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 95 OF 96

<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)

MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. PAYCHEX**

Mailing Address 50 IRON POINT CIR. #200

Date of Disbursement

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

City  
FOLSOMState  
CAZip Code  
95630

FEC Identification Number

C

Purpose of Disbursement  
PAYROLL SVC.

001

Amount of Each Disbursement this Period

87.62

Transaction ID : EB173642

☐ Memo Item

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:

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

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

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

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

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

87.62

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

147606.45

# SCHEDULE D (FEC Form 3)

## DEBTS AND OBLIGATIONS

### Excluding Loans

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

PAGE 96 OF 96

FOR LINE NUMBER:  
(check only one)

☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

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

**CHASE CARD SERVICES**

Nature of Debt (Purpose):

CREDIT CARD PAYMENT

Mailing Address P. O. BOX 6294

City

CAROL STREAM

State

IL

Zip Code

60197

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD173678

Amount Incurred This Period

697.11

Payment This Period

0.00

Outstanding Balance at Close of This Period

697.11

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

**THE TOWNSEND GROUP**

Nature of Debt (Purpose):

FUNDRAISING CONSULTING

Mailing Address 2308 MT. VERNON AVE. #707

City

ALEXANDRIA

State

VA

Zip Code

22301

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD173681

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

**VLC FINANCIAL SERVICES**

Nature of Debt (Purpose):

COMPLIANCE REPORTING

Mailing Address 10093 DAVIS ROAD

City

WILTON

State

CA

Zip Code

95693

Outstanding Balance Beginning This Period

0.00

Transaction ID : PD173724

Amount Incurred This Period

508.93

Payment This Period

0.00

Outstanding Balance at Close of This Period

508.93

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

3206.04

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

3206.04

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) .....

3206.04