

FEC
FORM 3XREPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Hemp Industry & Farmers of America

ADDRESS (number and street)

824 S Milledge Ave Ste 101

Check if different
than previously
reported. (ACC)

Athens

GA

30605

-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00905745

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly
Report
Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11)
(Non-Election
Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
(Non-Election
Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)(c) 12-Day
PRE-Election
Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S)

Election on

 M M / D D / Y Y Y Yin the
State of (d) 30-Day
POST-Election
Report for the: General (30G) Runoff (30R) Special (30S)

Election on

 M M / D D / Y Y Y Y Y Yin the
State of

5. Covering Period

 01 01 2025

through

 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

Kilgore, Paul, , ,

Signature of Treasurer

Kilgore, Paul, , ,

Date

 02 13 2026

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

Office
Use
OnlyFEC FORM 3X
Rev. 05/2016

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page **2**

Write or Type Committee Name

Hemp Industry & Farmers of America

Report Covering the Period: From:

M M
01D D
01Y Y Y Y Y
2025

To:

M M
06D D
30Y Y Y Y Y
2025**COLUMN A**
This Period**COLUMN B**
Calendar Year-to-Date

6. (a) Cash on Hand January 1,	Y Y Y Y Y 2025	0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	0.00
(c) Total Receipts (from Line 19)	331000.00	331000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	331000.00	331000.00
7. Total Disbursements (from Line 31).....	113390.48	113390.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	217609.52	217609.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	0.00
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	0.00



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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Hemp Industry & Farmers of America

Report Covering the Period: From:

M 01

D 01

Y 2025

To:

M 06

D 30

Y 2025

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....►	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	331000.00	331000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	331000.00	331000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	331000.00	331000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	113390.48	113390.48
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	113390.48	113390.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	113390.48	113390.48

DETAILED SUMMARY PAGE
of Disbursements

Page 5

FEC Form 3X (Rev. 05/2016)

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 18

(check only one)

11a	11b	11c	12
13	14	15	16

17

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

NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. Aeight Industries, Inc.

Mailing Address 740 S Harbor Blvd Ste 2013

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M = M 06	/	D = D 18	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA17.4846

Amount of Each Receipt this Period

20000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

20000.00

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

B. Aeight Industries, Inc.

Mailing Address 740 S Harbor Blvd Ste 2013

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M = M 06	/	D = D 25	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA17.4848

Amount of Each Receipt this Period

25000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

45000.00

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

C. Bays Online LLC

Mailing Address 62 NE 167th St Ste 1009

City Miami	State FL	Zip Code 33162
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FEC ID number of contributing
federal political committee.

C

Date of Receipt

M = M 06	/	D = D 09	/	Y = Y 2025
-------------	---	-------------	---	---------------

Transaction ID : SA17.4850

Amount of Each Receipt this Period

30000.00

 Memo Item

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

30000.00

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

75000.00

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

75000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 18

(check only one)

11a	11b	11c	12
13	14	15	16

12

13

14

15

16

17

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. Goodall, William, , ,

Mailing Address 62 NE 167th St Ste 1009

City
MiamiState
FLZip Code
33162FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Bays Online LLC

Occupation (for Individual)

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M 06	/ D D 09	/ Y Y Y Y Y 2025
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Transaction ID : SA17.4850.0

Amount of Each Receipt this Period

30000.00

 Memo Item

Non Contribution Account

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

B. Bays Online LLC

Mailing Address 62 NE 167th St Ste 1009

City
MiamiState
FLZip Code
33162FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Bays Online LLC

Occupation (for Individual)

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

55000.00

Date of Receipt

M M 06	/ D D 24	/ Y Y Y Y Y 2025
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Transaction ID : SA17.4856

Amount of Each Receipt this Period

25000.00

 Memo Item

Non Contribution Account

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

C. Goodall, William, , ,

Mailing Address 62 NE 167th St Ste 1009

City
MiamiState
FLZip Code
33162FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Bays Online LLC

Occupation (for Individual)

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

55000.00

Date of Receipt

M M 06	/ D D 24	/ Y Y Y Y Y 2025
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Transaction ID : SA17.4856.0

Amount of Each Receipt this Period

25000.00

 Memo Item

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

25000.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		<input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. Cambria Management LLC

Mailing Address 2075 Thurin St

City Costa Mesa	State CA	Zip Code 92627
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FEC ID number of contributing
federal political committee.

C

Date of Receipt

M = M 06	/	D = D 12	/	Y = Y 2025
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Transaction ID : SA17.4859

Amount of Each Receipt this Period

25000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

25000.00

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

B. Pappamk, Carlo, , ,

Mailing Address 2075 Thurin St

City Costa Mesa	State CA	Zip Code 92627
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M = M 06	/	D = D 12	/	Y = Y 2025
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Transaction ID : SA17.4859.0

Amount of Each Receipt this Period

25000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Cambria Management LLC

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

25000.00

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

C. Cambria Management LLC

Mailing Address 2075 Thurin St

City Costa Mesa	State CA	Zip Code 92627
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M = M 06	/	D = D 25	/	Y = Y 2025
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Transaction ID : SA17.4863

Amount of Each Receipt this Period

25000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

50000.00

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

50000.00

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

50000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		<input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. Pappamk, Carlo, , ,

Mailing Address 2075 Thurin St

City Costa Mesa	State CA	Zip Code 92627
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M = M 06	/	D = D 25	/	Y = Y 2025
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Transaction ID : SA17.4863.0

Amount of Each Receipt this Period

25000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Cambria Management LLC

Occupation (for Individual)

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

50000.00

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

B. DC Brands LLC

Mailing Address 70 Greene St

City Jersey City	State NJ	Zip Code 07302
---------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M = M 06	/	D = D 30	/	Y = Y 2025
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Transaction ID : SA17.4867

Amount of Each Receipt this Period

10000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

10000.00

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

C. Nishil, Patel, , ,

Mailing Address 70 Greene St

City Jersey City	State NJ	Zip Code 07302
---------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

M = M 06	/	D = D 30	/	Y = Y 2025
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Transaction ID : SA17.4867.0

Amount of Each Receipt this Period

10000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

DC Brands LLC

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

10000.00

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

10000.00

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

10000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 OF 18

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. Flora Bio Group, LLC

Mailing Address 2850 McClelland Dr Ste 2400

City Fort Collins	State CO	Zip Code 80525
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FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4871

Amount of Each Receipt this Period

25000.00

Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

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

B. Dee, Mike, , ,

Mailing Address 1285 Factory Circle

City Fort Lupton	State CO	Zip Code 80621
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FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4871.0

Amount of Each Receipt this Period

25000.00

Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Flora Bio Group, LLC

Owner

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

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

C. Fresh Farms E Liquid LLC

Mailing Address 11640 Warner Ave Ste 524

City Fountain Valley	State CA	Zip Code 92708
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FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4875

Amount of Each Receipt this Period

25000.00

Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

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

50000.00

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

50000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 18

(check only one)

11a	11b	11c	12
13	14	15	16

17

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. Devincentis, Tony, , ,

Mailing Address 11640 Warner Ave Ste 542

City Fountain Valley	State CA	Zip Code 92708
-------------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4875.0

Amount of Each Receipt this Period

25000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Fresh Farms E Liquid LLC

Occupation (for Individual)

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

25000.00

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

B. HH North LLC

Mailing Address 19701 Bethel Church Rd Ste 103-300

City Cornelius	State NC	Zip Code 28031
-------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4879

Amount of Each Receipt this Period

20000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

20000.00

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

C. Valentine, Lee, , , II

Mailing Address 19701 Bethel Church Rd

City Cornelius	State NC	Zip Code 28031
-------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4879.0

Amount of Each Receipt this Period

20000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

HH North LLC

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

20000.00

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

20000.00

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

20000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 OF 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		<input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. HILYF Tech LLC

Mailing Address 5155 Katella AVE

City Cypress	State CA	Zip Code 90720
-----------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4883

Amount of Each Receipt this Period

20000.00

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

20000.00

Non Contribution Account

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

B. Intakter LLC Lobbying

Mailing Address 7800 Peters Rd Ste 200

City Plantation	State FL	Zip Code 33324
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4886

Amount of Each Receipt this Period

5000.00

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

Non Contribution Account

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

C. Kerrigan, Collin, , ,

Mailing Address 7800 Peters Rd Ste 200

City Plantation	State FL	Zip Code 33324
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4886.0

Amount of Each Receipt this Period

5000.00

Name of Employer (for Individual)

Occupation (for Individual)

Intakter Lobbying LLC

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

Non Contribution Account

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

25000.00

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

25000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		<input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. L&K Distribution

Mailing Address 222 South Harbor Blvd Ste 530

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

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

Transaction ID : SA17.4890

Amount of Each Receipt this Period

25000.00

Memo Item

Non Contribution Account

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

B. Lee, John, , ,

Mailing Address 222 South Harbor Blvd Ste 530

City Anaheim	State CA	Zip Code 92805
-----------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

L&K Distribution

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

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

Transaction ID : SA17.4890.0

Amount of Each Receipt this Period

25000.00

Memo Item

Non Contribution Account

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

C. MGT & Governance

Mailing Address 1821 Logan Ave

City Cheyenne	State WY	Zip Code 82001
------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA17.4894

Amount of Each Receipt this Period

1000.00

Memo Item

Non Contribution Account

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

26000.00

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

26000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 OF 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		<input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. Peak 24 Lobbying

Mailing Address 7800 Peters Rd Ste 200

City Plantation	State FL	Zip Code 33324
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4897

Amount of Each Receipt this Period

15000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

15000.00

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

B. Kerrigan, Collin, , ,

Mailing Address 7800 Peters Rd Ste 200

City Plantation	State FL	Zip Code 33324
--------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4897.0

Amount of Each Receipt this Period

15000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Intakter Lobbying LLC

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

20000.00

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

C. Serena Management LLC

Mailing Address 17791 Jamestown Lane

City Huntington Beach	State CA	Zip Code 92647
--------------------------	-------------	-------------------

FEC ID number of contributing
federal political committee.

C

Date of Receipt

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

Transaction ID : SA17.4901

Amount of Each Receipt this Period

5000.00

 Memo Item

Non Contribution Account

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

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

Aggregate Year-to-Date ▼

5000.00

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

20000.00

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

20000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 18

(check only one)

11a	11b	11c	12
13	14	15	16

12

13

14

15

16

17

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

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

A. Pappamk, Carlo, , ,

Mailing Address 2075 Thurin St

City
Costa MesaState
CAZip Code
92627FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cambria Management LLC

Occupation (for Individual)

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

55000.00

Date of Receipt

M M M 06	/	D D D 27	/	Y Y Y Y Y 2025
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Transaction ID : SA17.4901.0

Amount of Each Receipt this Period

5000.00

 Memo Item

Non Contribution Account

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

B. Torch Drinks Lobbying

Mailing Address 7800 Peters Rd Ste 200

City
PlantationState
FLZip Code
33324FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Cambria Management LLC

Occupation (for Individual)

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M 06	/	D D D 17	/	Y Y Y Y Y 2025
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Transaction ID : SA17.4905

Amount of Each Receipt this Period

15000.00

 Memo Item

Non Contribution Account

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

C. Kerrigan, Collin, , ,

Mailing Address 7800 Peters Rd Ste 200

City
PlantationState
FLZip Code
33324FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Intakter Lobbying LLC

Occupation (for Individual)

Owner

Receipt For:

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

Aggregate Year-to-Date ▼

35000.00

Date of Receipt

M M M 06	/	D D D 17	/	Y Y Y Y Y 2025
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Transaction ID : SA17.4905.0

Amount of Each Receipt this Period

15000.00

 Memo Item

Non Contribution Account

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

15000.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 OF 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
13	14	15	16
		<input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Hemp Industry & Farmers of America

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt																						
A. Torch Ent Lobbying		<table border="1"> <tr> <td>M</td> <td>M</td> <td>/</td> <td>D</td> <td>D</td> <td>/</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td>06</td> <td></td> <td></td> <td>17</td> <td></td> <td></td> <td>2025</td> <td></td> <td></td> <td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	06			17			2025			
M	M	/	D	D	/	Y	Y	Y	Y															
06			17			2025																		
Mailing Address 7800 Peters Rd Ste 200		Transaction ID : SA17.4913																						
City Plantation		State FL	Zip Code 33324	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td> <td colspan="5">15000.00</td> </tr> </table>			C	15000.00																		
C	15000.00																							
Name of Employer (for Individual)		Occupation (for Individual)																						
Receipt For:		Aggregate Year-to-Date ▼																						
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td colspan="6">15000.00</td> </tr> </table>			15000.00																			
15000.00																								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt																						
B. Kerrigan, Collin, , ,		<table border="1"> <tr> <td>M</td> <td>M</td> <td>/</td> <td>D</td> <td>D</td> <td>/</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td>06</td> <td></td> <td></td> <td>17</td> <td></td> <td></td> <td>2025</td> <td></td> <td></td> <td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	06			17			2025			
M	M	/	D	D	/	Y	Y	Y	Y															
06			17			2025																		
Mailing Address 7800 Peters Rd Ste 200		Transaction ID : SA17.4913.0																						
City Plantation		State FL	Zip Code 33324	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td> <td colspan="5">15000.00</td> </tr> </table>			C	15000.00																		
C	15000.00																							
Name of Employer (for Individual)		Occupation (for Individual)																						
Intakter Lobbying LLC		Owner																						
Receipt For:		Aggregate Year-to-Date ▼																						
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td colspan="6">50000.00</td> </tr> </table>			50000.00																			
50000.00																								
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name		Date of Receipt																						
C.		<table border="1"> <tr> <td>M</td> <td>M</td> <td>/</td> <td>D</td> <td>D</td> <td>/</td> <td>Y</td> <td>Y</td> <td>Y</td> <td>Y</td> </tr> <tr> <td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y															
Mailing Address		Amount of Each Receipt this Period																						
City		State	Zip Code	<table border="1"> <tr> <td colspan="5">15000.00</td> </tr> </table>	15000.00																			
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FEC ID number of contributing federal political committee.		<table border="1"> <tr> <td>C</td> <td colspan="5">15000.00</td> </tr> </table>			C	15000.00																		
C	15000.00																							
Name of Employer (for Individual)		Occupation (for Individual)																						
Receipt For:		Aggregate Year-to-Date ▼																						
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<table border="1"> <tr> <td colspan="6">15000.00</td> </tr> </table>			15000.00																			
15000.00																								
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="5">15000.00</td> </tr> </table>			15000.00																			
15000.00																								
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="5">331000.00</td> </tr> </table>			331000.00																			
331000.00																								

SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 18

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	26	<input type="checkbox"/>	27
<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input checked="" type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

Full Name (Last, First, Middle Initial)

A. Atlas Ridge Partners

Mailing Address 1401 Freedom Dr

City
Charlotte

State
NC

Zip Code
28208

Purpose of Disbursement

PAC Strategy Consulting Non Contribution Account

Candidate Name

Category/
Type

Office Sought:

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

House
Senate
President

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Classic City Bank

Mailing Address 2365 W Broad St

City
Athens

State
GA

Zip Code
30606

Purpose of Disbursement

PAC Bank Fees Non Contribution Account

Candidate Name

Category/
Type

Office Sought:

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

House
Senate
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. Dickinson Wright PLLC

Mailing Address 2600 W Big Beaver Ste 300

City
Troy

State
MI

Zip Code
48084

Purpose of Disbursement

PAC Legal Fees Non Contribution Account

Candidate Name

Category/
Type

Office Sought:

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

House
Senate
President

Disbursement For:

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

State:

District:

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

100730.00

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

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.4917

Amount of Each Disbursement this Period

100000.00

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.4931

Amount of Each Disbursement this Period

140.00

Memo Item

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.4919

Amount of Each Disbursement this Period

590.00

Memo Item

SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 18

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	26	<input type="checkbox"/>	27
<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input checked="" type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

Hemp Industry & Farmers of America

Full Name (Last, First, Middle Initial)

A. Professional Data Services

Mailing Address 824 S Milledge Ave Ste 101

City Athens	State GA	Zip Code 30605
----------------	-------------	-------------------

Purpose of Disbursement

PAC Compliance Consulting Non Contribution Account

Candidate Name

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

Date of Disbursement

<input type="checkbox"/>	M M	/	<input type="checkbox"/>	D D	/	<input type="checkbox"/>	Y Y Y Y Y Y
<input type="checkbox"/>	06		<input type="checkbox"/>	18		<input type="checkbox"/>	2025

FEC Identification Number

<input type="checkbox"/>	C
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Transaction ID : SB29.4915

Amount of Each Disbursement this Period

2540.48

Memo Item

Office Sought:

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

Disbursement For:

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

State:

<input type="checkbox"/>
District:

Full Name (Last, First, Middle Initial)

B. Victoria Tullo

Mailing Address 6001 Hughes Crossing Apt 320

City Franklin	State TN	Zip Code 37064
------------------	-------------	-------------------

Purpose of Disbursement

PAC Communications Consulting Non Contribution Account

Candidate Name

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

Date of Disbursement

<input type="checkbox"/>	M M	/	<input type="checkbox"/>	D D	/	<input type="checkbox"/>	Y Y Y Y Y Y
<input type="checkbox"/>	06		<input type="checkbox"/>	30		<input type="checkbox"/>	2025

FEC Identification Number

<input type="checkbox"/>	C
--------------------------	---

Transaction ID : SB29.4921

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

<input type="checkbox"/>	M M	/	<input type="checkbox"/>	D D	/	<input type="checkbox"/>	Y Y Y Y Y Y
<input type="checkbox"/>			<input type="checkbox"/>			<input type="checkbox"/>	

FEC Identification Number

<input type="checkbox"/>	C
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Amount of Each Disbursement this Period

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Memo Item

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

12540.48

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

113270.48