

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

CLF

ADDRESS (number and street)

1747 Pennsylvania Avenue, NW

5th Floor

Check if different
than previously
reported. (ACC)

Washington

DC

20006

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00504530

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)**4. TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☒ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

2026

in the
State of

CA

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

04

D D D /

01

Y Y Y Y Y Y

2026

through

M M M /

05

D D D /

13

Y Y Y Y Y Y

2026

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

Crosby, Caleb, , ,

Signature of Treasurer

Crosby, Caleb, , ,

Date

M M M /

08

D D D /

05

Y Y Y Y Y Y

2026

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

CLF

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2026

To:

MM / DD / YYYY
05 / 13 / 2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2026		54542329.13
(b) Cash on Hand at Beginning of Reporting Period.....	91441431.46	
(c) Total Receipts (from Line 19)	16965057.00	55117969.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	108406488.46	109660298.77
7. Total Disbursements (from Line 31)	1326022.58	2579832.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	107080465.88	107080465.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

CLF

Report Covering the Period:

From:

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

To:

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

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	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	20000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	195596.92
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.).....	16965057.00	54902372.72
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))	16965057.00	55117969.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16965057.00	55117969.64

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	250.00	1002.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	250.00	1002.50
22. Transfers to Affiliated/Other Party Committees.....	5000.00	5000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	100000.00	100000.00
24. Independent Expenditures (use Schedule E)	124962.99	124962.99
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).....	1095809.59	2348867.40
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)) ..	1326022.58	2579832.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1326022.58	2579832.89

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	20000.00
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	20000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	250.00	1002.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	250.00	1002.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 96
(check only one)

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

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)

CLF

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

A. LUTNICK, HOWARD, W., ,

Mailing Address 11 EAST 71ST STREET

City
NEW YORKState
NYZip Code
10021-4102FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UNITED STATES DEPARTMENT OF COMMERCEOccupation (for Individual)
SECRETARY OF COMMERCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2026

Transaction ID : SA17.621874

Amount of Each Receipt this Period

5000000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. UIHLEIN, ELIZABETH, , ,

Mailing Address PO BOX 52

City
LAKE BLUFFState
ILZip Code
60044-0052FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ULINEOccupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2026

Transaction ID : SA17.620927

Amount of Each Receipt this Period

500000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2026

Transaction ID : SA17.620899

Amount of Each Receipt this Period

414.30

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

5500000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. BUCHER, ANITA, , ,

Mailing Address 14521 N ROCK SPRINGS LANE

City
ORO VALLEYState
AZZip Code
85755-6674FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 02 / 2026

Transaction ID : SA17.620904

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. DAPHNIS, PETER, , ,

Mailing Address 80-15 164 PLACE

City
HILLCRESTState
NYZip Code
11432-1228FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PERKINELMER US LLCOccupation (for Individual)
SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 02 / 2026

Transaction ID : SA17.620910

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. SOLOMONS, BERNARD, , ,

Mailing Address 43287 BAYHILL DRIVE

City
ROMULUSState
MIZip Code
48174-FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 02 / 2026

Transaction ID : SA17.620905

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 8 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.☒ C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 02 / 2026

Transaction ID : SA17.620918

Amount of Each Receipt this Period

165.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. NELSON, WAYDE, , ,

Mailing Address 1245 EMERALDPORT ST

City
CORONAState
CAZip Code
92881-0967FEC ID number of contributing
federal political committee.☒ C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 02 / 2026

Transaction ID : SA17.620923

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. MCCAUSLAND, PETER, , ,

Mailing Address 190 GOMEZ ROAD

City
HOBE SOUNDState
FLZip Code
33455-2513FEC ID number of contributing
federal political committee.☒ C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2026

Transaction ID : SA17.621873

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

100060.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2026

Transaction ID : SA17.620930

Amount of Each Receipt this Period

198.27

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. DAMON III, ALBERT, , ,

Mailing Address 101 PINE HILL RD

City
WAKEFIELDState
RIZip Code
02879-2824FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2026

Transaction ID : SA17.620938

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. TABAT, MARTIN, , ,

Mailing Address 7 DIXVILLE ST

City
NASHUAState
NHZip Code
03063-2514FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2026

Transaction ID : SA17.620936

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

76.03

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2026

Transaction ID : SA17.620944

Amount of Each Receipt this Period

280.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. BARR, CARLA, , ,

Mailing Address P.O. BOX 745

City
RUNNING SPRINGSState
CAZip Code
92382-0745FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2026

Transaction ID : SA17.620955

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BARR, CARLA, , ,

Mailing Address P.O. BOX 745

City
RUNNING SPRINGSState
CAZip Code
92382-0745FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 03 / 2026

Transaction ID : SA17.620956

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 96
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☐ 13	☐ 14	☐ 15	☐ 16	☒ 17
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NAME OF COMMITTEE (In Full)

CLF

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

A. BYRD, FAREL, , ,

Mailing Address 986 SUGAR LANE

City
COLLIERVILLEState
TNZip Code
38017-8645FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2026

Transaction ID : SA17.620945

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. STRANDBERG, ERIC, , ,

Mailing Address 231 COLUMBIA STREET

City
OMAKState
WAZip Code
98841-9625FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
MANUFACTURING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2026

Transaction ID : SA17.620946

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 04 / 2026

Transaction ID : SA17.620957

Amount of Each Receipt this Period

348.98

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. BELLINI, DAVID, , ,

Mailing Address 2900 W JULIA ST.

City
TAMPAState
FLZip Code
33629-FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2026

Transaction ID : SA17.620958

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. HAZEN, PHILLIP, , ,

Mailing Address 40280 SPECTACULAR BID PL

City
LEESBURGState
VAZip Code
20176-7173FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2026

Transaction ID : SA17.620965

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2026

Transaction ID : SA17.620977

Amount of Each Receipt this Period

55.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

204.10

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 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. HERNANDEZ, SHARON, , ,

Mailing Address 2415 CREEK MEADOW DR.

City
HOUSTON

State
TX

Zip Code
77084-5201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATY ISD

Occupation (for Individual)
BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

04 / 04 / 2026

Transaction ID : SA17.620980

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

04 / 05 / 2026

Transaction ID : SA17.620981

Amount of Each Receipt this Period

328.41

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. FERRARI, CHRISTINE, , ,

Mailing Address 17 DIAMANTE

City
IRVINE

State
CA

Zip Code
92620-1904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 05 / 2026

Transaction ID : SA17.620984

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

70.00

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 96

(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)

CLF

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

A. HERMELING BUCKENDORF, SHOSHANA, , ,

Mailing Address 18849 TUMALO RESERVOIR ROAD

City
BENDState
ORZip Code
97703-5302FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	05	2026

Transaction ID : SA17.620987

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. MAGCALAS, GLORIA, , ,

Mailing Address 1117 EAST KNOLLCREST DRIVE

City
COVINAState
CAZip Code
91724-3433FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	05	2026

Transaction ID : SA17.620996

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	05	2026

Transaction ID : SA17.620997

Amount of Each Receipt this Period

126.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

152.05

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 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. ROSE, JUDAH, , ,

Mailing Address 2812 R STREET NW

City
WASHINGTON

State
DC

Zip Code
20007-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2026

Transaction ID : SA17.621000

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2026

Transaction ID : SA17.621055

Amount of Each Receipt this Period

109.49

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. CASSEL, PAUL, , ,

Mailing Address 2805 GREEN PORT DR.

City
HERNANDO

State
MS

Zip Code
38632-7276

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2026

Transaction ID : SA17.621056

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. OBRIEN, JOHN, , ,

Mailing Address P.O.BOX 1644, 104 NOB DR.

City
RUIDOSO

State
NM

Zip Code
88355-1644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2026

Transaction ID : SA17.621062

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2026

Transaction ID : SA17.621067

Amount of Each Receipt this Period

140.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. CROKE, JAMES, , ,

Mailing Address 13 HIAWATHA ROAD

City
HARWICH PORT

State
MA

Zip Code
02646-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 07 / 2026

Transaction ID : SA17.621070

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

85.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 17 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 09 / 2026

Transaction ID : SA17.621091

Amount of Each Receipt this Period

121.06

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. OBRIEN, JOHN, , ,

Mailing Address P.O.BOX 1644, 104 NOB DR.

City
RUIDOSOState
NMZip Code
88355-1644FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 09 / 2026

Transaction ID : SA17.621095

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COINBASE GLOBAL, INC.Mailing Address 548 MARKET STREET
#23008City
SAN FRANCISCOState
CAZip Code
94104-5401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2026

Transaction ID : SA17.621125

Amount of Each Receipt this Period

500000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

500050.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 18 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2026

Transaction ID : SA17.621138

Amount of Each Receipt this Period

74.90

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. BORNHEIMER, JAMES, , ,

Mailing Address 911 SHERMAN PARKWAY

City
BELTONState
MOZip Code
64012-4207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2026

Transaction ID : SA17.621143

Amount of Each Receipt this Period

0.89

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2026

Transaction ID : SA17.621167

Amount of Each Receipt this Period

120.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

0.89

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. HYMOWITZ, VICTOR, , ,

Mailing Address 2000 NORTH GRAMERCY PLACE

City
LOS ANGELESState
CAZip Code
90068-3617FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2026

Transaction ID : SA17.621168

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2026

Transaction ID : SA17.621179

Amount of Each Receipt this Period

60.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. MANNING, BETTY, , ,

Mailing Address 5430OLIVET RD

City
GEORGETOWNState
ILZip Code
61846-6178FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2026

Transaction ID : SA17.621180

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150.00

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

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

FOR LINE NUMBER: PAGE 20 OF 96

(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)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2026

Transaction ID : SA17.621191

Amount of Each Receipt this Period

55.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City
SARATOGA

State
WY

Zip Code
82331-0399

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 12 / 2026

Transaction ID : SA17.621193

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2026

Transaction ID : SA17.621237

Amount of Each Receipt this Period

77.83

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

50.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 96
(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)

CLF

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

A. CROWTHER, MARY, , ,

Mailing Address 8431 BRIAR LANE

City
PRAIRIE VILLAGEState
KSZip Code
66207-1746FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 13 / 2026

Transaction ID : SA17.621246

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. YASS, JEFF, , MR,Mailing Address 401 EAST CITY AVENUE
SUITE 220City
BALA CYNWYDState
PAZip Code
19004-1117FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STGOccupation (for Individual)
MANAGING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2026

Transaction ID : SA17.621263

Amount of Each Receipt this Period

2000000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2026

Transaction ID : SA17.621275

Amount of Each Receipt this Period

140.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

2000025.00

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

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

FOR LINE NUMBER: PAGE 22 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WEBBER, JIM, , ,

Mailing Address 4208 BRIARGROVE LANE

City
DALLAS

State
TX

Zip Code
75287-6603

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STRYKER

Occupation (for Individual)
SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2026

Transaction ID : SA17.621276

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2026

Transaction ID : SA17.621291

Amount of Each Receipt this Period

391.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. BACH, MICHAEL, , ,

Mailing Address 452 EAST SILVERADO RANCH BLVD

City
LAS VEGAS

State
NV

Zip Code
89183-6290

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 16 / 2026

Transaction ID : SA17.621292

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 23 OF 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. BERRY, MARILYN, , ,

Mailing Address 40242 E LOUISIANA DR.

City
BENNETT

State
CO

Zip Code
80102-8436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2026

Transaction ID : SA17.621293

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BERRY, MARILYN, , ,

Mailing Address 40242 E LOUISIANA DR.

City
BENNETT

State
CO

Zip Code
80102-8436

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2026

Transaction ID : SA17.621297

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 19 / 2026

Transaction ID : SA17.621368

Amount of Each Receipt this Period

165.74

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 24 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. GRIFFIN, RICHARD, , ,

Mailing Address 3457 CHIPMAN ROAD

City
EASTONState
PAZip Code
18045-3024FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MINTEQ INTERNATIONALOccupation (for Individual)
SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2026

Transaction ID : SA17.621370

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2026

Transaction ID : SA17.621396

Amount of Each Receipt this Period

205.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. GRUNOW, JOHN, , ,

Mailing Address 24 DOCKSIDE LNE #459

City
KEY LARGOState
FLZip Code
33037-FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2026

Transaction ID : SA17.621404

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

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

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

FOR LINE NUMBER: PAGE 25 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. ATLANTA BRAVES HOLDINGS, INC.

Mailing Address 755 BATTERY AVENUE SOUTHEAST

City
ATLANTA

State
GA

Zip Code
30339-3017

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 21 / 2026

Transaction ID : SA17.621406

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. KOCH GA, INC.

Mailing Address 4111 EAST 37TH ST NORTH

City
WICHITA

State
KS

Zip Code
67220-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 21 / 2026

Transaction ID : SA17.621405

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. THE ANSCHUTZ CORPORATION

Mailing Address 555 17TH STREET
SUITE 2400

City
DENVER

State
CO

Zip Code
80202-3941

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 21 / 2026

Transaction ID : SA17.621408

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

525000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2026

Transaction ID : SA17.621410

Amount of Each Receipt this Period

131.63

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. CROWTHER, MARY, , ,

Mailing Address 8431 BRIAR LANE

City
PRAIRIE VILLAGEState
KSZip Code
66207-1746FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2026

Transaction ID : SA17.621413

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2026

Transaction ID : SA17.621450

Amount of Each Receipt this Period

238.50

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

20.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. BAYLESS, CAROLYN, , ,

Mailing Address 1541 MONCREY AVE.

City
LEAGUE CITYState
TXZip Code
77573-2078FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2026

Transaction ID : SA17.621455

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. ZELLNER, C., , ,

Mailing Address 150 S. HWY 160, STE 8 #287

City
PAHRUMPState
NVZip Code
89048-2133FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2026

Transaction ID : SA17.621453

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. ZELLNER, C., , ,

Mailing Address 150 S. HWY 160, STE 8 #287

City
PAHRUMPState
NVZip Code
89048-2133FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2026

Transaction ID : SA17.621454

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

145.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2026

Transaction ID : SA17.621533

Amount of Each Receipt this Period

526.51

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. YAW, NELDA, , ,

Mailing Address 632 HUNTERS WAY

City
NEW BRAUNFELSState
TXZip Code
78132-4775FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2026

Transaction ID : SA17.621539

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 26 / 2026

Transaction ID : SA17.621601

Amount of Each Receipt this Period

77.50

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

500.00

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 29 OF 96

(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☒ 16

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NAME OF COMMITTEE (In Full)

CLF

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

A. HERNANDEZ, SHARON, , ,

Mailing Address 2415 CREEK MEADOW DR.

City
HOUSTONState
TXZip Code
77084-5201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATY ISDOccupation (for Individual)
BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	26	2026

Transaction ID : SA17.621603

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. HERNANDEZ, SHARON, , ,

Mailing Address 2415 CREEK MEADOW DR.

City
HOUSTONState
TXZip Code
77084-5201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
KATY ISDOccupation (for Individual)
BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	26	2026

Transaction ID : SA17.621604

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
04	27	2026

Transaction ID : SA17.621609

Amount of Each Receipt this Period

1215.48

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

45.00

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

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

FOR LINE NUMBER: PAGE 30 OF 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. BERENSON, HAROLD, R., ,

Mailing Address 3833 LORRAINE RD

City
LARKSPUR

State
CO

Zip Code
80118-5616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2026

Transaction ID : SA17.621622

Amount of Each Receipt this Period

750.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. BERENSON, HAROLD, R., ,

Mailing Address 3833 LORRAINE RD

City
LARKSPUR

State
CO

Zip Code
80118-5616

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.622167

Amount of Each Receipt this Period

- 750.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; EARMARKED BY
WINRED - CHARGED BACK

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

C. POPE, RICHARF, , ,

Mailing Address 31 OCEAN REEF DR.

City
KEY LARGO

State
FL

Zip Code
33037-5282

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2026

Transaction ID : SA17.621617

Amount of Each Receipt this Period

300.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2026

Transaction ID : SA17.621635

Amount of Each Receipt this Period

410.50

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. BORNHEIMER, JAMES, , ,

Mailing Address 911 SHERMAN PARKWAY

City
BELTONState
MOZip Code
64012-4207FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.45

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2026

Transaction ID : SA17.621644

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 28 / 2026

Transaction ID : SA17.621662

Amount of Each Receipt this Period

370.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

25.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 32 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. HALL, TIM, , ,

Mailing Address 9235 BRUMBELOW ROAD

City
ALPHARETTAState
GAZip Code
30022-5230FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
QEMOccupation (for Individual)
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 28 / 2026

Transaction ID : SA17.621666

Amount of Each Receipt this Period

75.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. PANNELL, JEFF, , ,

Mailing Address 1418 WHISPERING DELL CT

City
SOUTHLAKEState
TXZip Code
76092-4615FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 28 / 2026

Transaction ID : SA17.621668

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. COLBURN, RICHARD, W., ,Mailing Address 555 SKOKIE BLVD. SUITE 555
SUITE 555City
NORTHBROOKState
ILZip Code
60062-2854FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PAYROLL & INSURANCE GROUP, INC.Occupation (for Individual)
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2026

Transaction ID : SA17.621711

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

100175.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. KELSEY, JOHN, DAVID, MR.,

Mailing Address 74 SILL LANE

City
OLD LYMEState
CTZip Code
06371-1134FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HAMILTON POINT INVESTMENTSOccupation (for Individual)
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2026

Transaction ID : SA17.621674

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. RICKETTS, MARLENE, , ,

Mailing Address 214 N. ELMWOOD ROAD

City
OMAHAState
NEZip Code
68132-FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2026

Transaction ID : SA17.621673

Amount of Each Receipt this Period

500000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 29 / 2026

Transaction ID : SA17.621675

Amount of Each Receipt this Period

421.71

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

600000.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 34 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. BRANT, JOSEPH, , ,

Mailing Address 719 CRANDON BLVD,

City
KEY BISCAVNEState
FLZip Code
33149-2533FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2026

Transaction ID : SA17.621694

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2026

Transaction ID : SA17.621701

Amount of Each Receipt this Period

169.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. ZELLNER, C., , ,

Mailing Address 150 S. HWY 160, STE 8 #287

City
PAHRUMPState
NVZip Code
89048-2133FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2026

Transaction ID : SA17.621707

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

120.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 35 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621713

Amount of Each Receipt this Period

1287.98

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. BORNHEIMER, JAMES, , ,

Mailing Address 911 SHERMAN PARKWAY

City
BELTONState
MOZip Code
64012-4207FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

204.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621728

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. EREMITY, FRANK, , ,

Mailing Address 12 DARTMOUTH CT

City
STREAMWOODState
ILZip Code
60107-2179FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621727

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

50.00

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 36 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. EREMITY, FRANK, , ,

Mailing Address 12 DARTMOUTH CT

City
STREAMWOOD

State
IL

Zip Code
60107-2179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621742

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. EREMITY, FRANK, , ,

Mailing Address 12 DARTMOUTH CT

City
STREAMWOOD

State
IL

Zip Code
60107-2179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621743

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. EREMITY, FRANK, , ,

Mailing Address 12 DARTMOUTH CT

City
STREAMWOOD

State
IL

Zip Code
60107-2179

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621744

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. GARRISON, KENNETH, , ,

Mailing Address 846 YAVAPAI HILLS DR.

City
PRESCOTTState
AZZip Code
86301-5793FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
GUARDIAN FLIGHT LLCOccupation (for Individual)
MEDEVAC PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621746

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. OBERLENDER, JANICE, , ,

Mailing Address 5533 PRESTWICK LANE

City
DALLASState
TXZip Code
75252-4978FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621729

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. OBERLENDER, JANICE, , ,

Mailing Address 5533 PRESTWICK LANE

City
DALLASState
TXZip Code
75252-4978FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621730

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

300.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. POWELL, GEORGE, , ,

Mailing Address 4718 HALLMARK DR #1001

City
HOUSTONState
TXZip Code
77056-3913FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621718

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. YUE, CALVIN, , ,

Mailing Address 2940 W 19TH AVE

City
EUGENEState
ORZip Code
97405-1302FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DICKY JOSOccupation (for Individual)
COOK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621752

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621754

Amount of Each Receipt this Period

235.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. LARSEN, LAWRENCE, , ,

Mailing Address 4331 GREEN TREE DRIVE

City
SACRAMENTOState
CAZip Code
95823-1978FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
LOS RIOS COLLEGE DISTRICTOccupation (for Individual)
ADJUNCT FACULTY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2026

Transaction ID : SA17.621759

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. GRIFFIN, KENNETH, C., ,Mailing Address 200 SOUTH BISCAYNE BOULEVARD
SUITE 3300City
MIAMIState
FLZip Code
33131-2349FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITADEL ASSET MANAGEMENTOccupation (for Individual)
CHIEF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2026

Transaction ID : SA17.621865

Amount of Each Receipt this Period

5000000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. STEPHENS, JOHN, , ,

Mailing Address 111 CENTER STREET

City
LITTLE ROCKState
ARZip Code
72201-4402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STEPHENS INC.Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2026

Transaction ID : SA17.621866

Amount of Each Receipt this Period

200000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

5200100.00

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

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

FOR LINE NUMBER: PAGE 40 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. STEPHENS, LAURA, , ,

Mailing Address 111 CENTER STREET

City
LITTLE ROCK

State
AR

Zip Code
72201-4402

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STEPHENS INC.

Occupation (for Individual)
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2026

Transaction ID : SA17.621867

Amount of Each Receipt this Period

100000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026

Transaction ID : SA17.621790

Amount of Each Receipt this Period

318.26

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. DAPHNIS, PETER, , ,

Mailing Address 80-15 164 PLACE

City
HILLCREST

State
NY

Zip Code
11432-1228

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
PERKINELMER US LLC

Occupation (for Individual)
SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026

Transaction ID : SA17.621799

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

100100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 41 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. SOLOMONS, BERNARD, , ,

Mailing Address 43287 BAYHILL DRIVE

City
ROMULUSState
MIZip Code
48174-FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026

Transaction ID : SA17.621795

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026

Transaction ID : SA17.621807

Amount of Each Receipt this Period

165.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. NELSON, WAYDE, , ,

Mailing Address 1245 EMERALDPORT ST

City
CORONAState
CAZip Code
92881-0967FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2026

Transaction ID : SA17.621812

Amount of Each Receipt this Period

60.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 42 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2026

Transaction ID : SA17.621816

Amount of Each Receipt this Period

188.27

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. DAMON III, ALBERT, , ,

Mailing Address 101 PINE HILL RD

City
WAKEFIELDState
RIZip Code
02879-2824FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

213.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2026

Transaction ID : SA17.621824

Amount of Each Receipt this Period

26.03

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. TABAT, MARTIN, , ,

Mailing Address 7 DIXVILLE ST

City
NASHUAState
NHZip Code
03063-2514FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2026

Transaction ID : SA17.621822

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

76.03

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 43 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2026

Transaction ID : SA17.621829

Amount of Each Receipt this Period

275.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. BARR, CARLA, , ,

Mailing Address P.O. BOX 745

City
RUNNING SPRINGS

State
CA

Zip Code
92382-0745

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2026

Transaction ID : SA17.621839

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BARR, CARLA, , ,

Mailing Address P.O. BOX 745

City
RUNNING SPRINGS

State
CA

Zip Code
92382-0745

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2026

Transaction ID : SA17.621840

Amount of Each Receipt this Period

10.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 44 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. BYRD, FAREL, , ,

Mailing Address 986 SUGAR LANE

City
COLLIERVILLEState
TNZip Code
38017-8645FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2026

Transaction ID : SA17.621830

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. STRANDBERG, ERIC, , ,

Mailing Address 231 COLUMBIA STREET

City
OMAKState
WAZip Code
98841-9625FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
MANUFACTURING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2026

Transaction ID : SA17.621831

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. STEPHENS, WARREN, A., ,

Mailing Address 111 CENTER STREET

City
LITTLE ROCKState
ARZip Code
72201-4402FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STEPHENS INC.Occupation (for Individual)
CHAIRMAN, PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : SA17.621864

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 45 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : SA17.621841

Amount of Each Receipt this Period

348.83

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. BELLINI, DAVID, , ,

Mailing Address 2900 W JULIA ST.

City
TAMPAState
FLZip Code
33629-FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : SA17.621842

Amount of Each Receipt this Period

104.10

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. HAZEN, PHILLIP, , ,

Mailing Address 40280 SPECTACULAR BID PL

City
LEESBURGState
VAZip Code
20176-7173FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : SA17.621848

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

204.10

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 46 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : SA17.621860

Amount of Each Receipt this Period

55.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. HERNANDEZ, SHARON, , ,

Mailing Address 2415 CREEK MEADOW DR.

City
HOUSTONState
TXZip Code
77084-5201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

KATY ISD

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2026

Transaction ID : SA17.621863

Amount of Each Receipt this Period

20.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. PBF HOLDING COMPANY LLC

Mailing Address 1 SYLVAN WAY

City
PARSIPPANYState
NJZip Code
07054-3887FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : SA17.621869

Amount of Each Receipt this Period

30000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

30020.00

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 47 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. **SORRENTO WEST PROPERTIES, INC.**

Mailing Address 16769 BERNARDO CENTER DRIVE

City
SAN DIEGO

State
CA

Zip Code
92128-2546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : SA17.621868

Amount of Each Receipt this Period

150000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. **WINRED**

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : SA17.621875

Amount of Each Receipt this Period

328.41

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. **FERRARI, CHRISTINE, , ,**

Mailing Address 17 DIAMANTE

City
IRVINE

State
CA

Zip Code
92620-1904

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : SA17.621878

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

150050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 48 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. HERMELING BUCKENDORF, SHOSHANA, , ,

Mailing Address 18849 TUMALO RESERVOIR ROAD

City
BENDState
ORZip Code
97703-5302FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : SA17.621881

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. MAGCALAS, GLORIA, , ,

Mailing Address 1117 EAST KNOLLCREST DRIVE

City
COVINAState
CAZip Code
91724-3433FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : SA17.621890

Amount of Each Receipt this Period

52.05

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : SA17.621891

Amount of Each Receipt this Period

126.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

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

152.05

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

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

FOR LINE NUMBER: PAGE 49 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. ROSE, JUDAH, , ,

Mailing Address 2812 R STREET NW

City
WASHINGTON

State
DC

Zip Code
20007-2918

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 05 / 2026

Transaction ID : SA17.621894

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. SABLE OFFSHORE CORP.

Mailing Address 845 TEXAS AVENUE

City
HOUSTON

State
TX

Zip Code
77002-2858

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 06 / 2026

Transaction ID : SA17.621909

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. TAH OPERATIONS

Mailing Address 15771 RED HILL AVENUE

City
TUSTIN

State
CA

Zip Code
92780-7303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : SA17.621910

Amount of Each Receipt this Period

50000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

300100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 50 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : SA17.621911

Amount of Each Receipt this Period

129.97

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. CASSEL, PAUL, , ,

Mailing Address 2805 GREEN PORT DR.

City
HERNANDOState
MSZip Code
38632-7276FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : SA17.621912

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. OBRIEN, JOHN, , ,

Mailing Address P.O.BOX 1644, 104 NOB DR.

City
RUIDOSOState
NMZip Code
88355-1644FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : SA17.621918

Amount of Each Receipt this Period

35.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

85.00

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 51 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : SA17.621924

Amount of Each Receipt this Period

140.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. CROKE, JAMES, , ,

Mailing Address 13 HIAWATHA ROAD

City
HARWICH PORT

State
MA

Zip Code
02646-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 07 / 2026

Transaction ID : SA17.621927

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. LANGONE, KENNETH, G., MR.,

Mailing Address 375 PARK AVENUE

City
NEW YORK

State
NY

Zip Code
10152-3804

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

INREMEL

BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

505000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : SA17.621932

Amount of Each Receipt this Period

500000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

500050.00

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

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

FOR LINE NUMBER: PAGE 52 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. CENOVUS ENERGY

Mailing Address 5550 PAUL BLAZER PARKWAY

City
DUBLIN

State
OH

Zip Code
43017-3477

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275000.00

Date of Receipt

05 / 08 / 2026

Transaction ID : SA17.622161

Amount of Each Receipt this Period

25000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

05 / 09 / 2026

Transaction ID : SA17.621947

Amount of Each Receipt this Period

93.98

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. OBRIEN, JOHN, ,

Mailing Address P.O.BOX 1644, 104 NOB DR.

City
RUIDOSO

State
NM

Zip Code
88355-1644

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

05 / 09 / 2026

Transaction ID : SA17.621951

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

25050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : SA17.621975

Amount of Each Receipt this Period

284.42

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

B. BORNHEIMER, JAMES, , ,

Mailing Address 911 SHERMAN PARKWAY

City
BELTONState
MOZip Code
64012-4207FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.45

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : SA17.621981

Amount of Each Receipt this Period

0.89

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. BUCHER, ANITA, , ,

Mailing Address 14521 N ROCK SPRINGS LANE

City
ORO VALLEYState
AZZip Code
85755-6674FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : SA17.621976

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

100.89

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. GRIFFIN, RICHARD, , ,

Mailing Address 3457 CHIPMAN ROAD

City
EASTONState
PAZip Code
18045-3024FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MINTEQ INTERNATIONALOccupation (for Individual)
SCIENTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : SA17.621985

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : SA17.622006

Amount of Each Receipt this Period

120.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. HYMOWITZ, VICTOR, , ,

Mailing Address 2000 NORTH GRAMERCY PLACE

City
LOS ANGELESState
CAZip Code
90068-3617FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2026

Transaction ID : SA17.622007

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. CENOVUS ENERGY

Mailing Address 5550 PAUL BLAZER PARKWAY

City
DUBLINState
OHZip Code
43017-3477FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2026

Transaction ID : SA17.622009

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219-1891FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2026

Transaction ID : SA17.622019

Amount of Each Receipt this Period

160.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. MANNING, BETTY, , ,

Mailing Address 5430OLIVET RD

City
GEORGETOWNState
ILZip Code
61846-6178FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2026

Transaction ID : SA17.622020

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250050.00

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

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

FOR LINE NUMBER: PAGE 56 OF 96
(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)

CLF

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

A. OTA HOLDINGS INC.

Mailing Address 1100 LOUISIANA ST
10TH FLOOR

City
HOUSTON

State
TX

Zip Code
77002-5432

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125000.00

Date of Receipt

MM / DD / YYYY
05 / 12 / 2026

Transaction ID : SA17.622023

Amount of Each Receipt this Period

125000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

MM / DD / YYYY
05 / 12 / 2026

Transaction ID : SA17.622031

Amount of Each Receipt this Period

55.00

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. DYER, STEPHEN, , ,

Mailing Address P.O. BOX 399

City
SARATOGA

State
WY

Zip Code
82331-0399

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 12 / 2026

Transaction ID : SA17.622033

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

125050.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. HUNT, WOODY, L., ,

Mailing Address PO BOX 12667

City
EL PASOState
TXZip Code
79913-0667FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HUNT COMPANIES INC.Occupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026

Transaction ID : SA17.622191

Amount of Each Receipt this Period

150000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. SERRAO, GREG, , ,Mailing Address 501 UNION STREET
STE 545City
NASHVILLEState
TNZip Code
37219-1876FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WILLIES REMEDY+Occupation (for Individual)
CO-FOUNDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

46500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026

Transaction ID : SA17.622034

Amount of Each Receipt this Period

46500.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

C. DELEK US ENERGY INC.

Mailing Address 310 SEVEN SPRINGS WAY

City
BRENTWOODState
TNZip Code
37027-5789FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 13 / 2026

Transaction ID : SA17.622036

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

446500.00

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

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

FOR LINE NUMBER: PAGE 58 OF 96
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

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

A. KOCH GA, INC.

Mailing Address 4111 EAST 37TH ST NORTH

City
WICHITA

State
KS

Zip Code
67220-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250000.00

Date of Receipt

05 / 13 / 2026

Transaction ID : SA17.622035

Amount of Each Receipt this Period

250000.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

B. WINRED

Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112096.48

Date of Receipt

05 / 13 / 2026

Transaction ID : SA17.622038

Amount of Each Receipt this Period

77.83

☒ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT; SEE
ATTRIBUTION BELOW FOR ALL DONORS ABOVE
ITEMIZATION THRESHOLD

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

C. CROWTHER, MARY, , ,

Mailing Address 8431 BRIAR LANE

City
PRAIRIE VILLAGE

State
KS

Zip Code
66207-1746

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

205.50

Date of Receipt

05 / 13 / 2026

Transaction ID : SA17.622047

Amount of Each Receipt this Period

25.00

☐ Memo Item

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

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

250025.00

16957211.14

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. CMDIMailing Address 1593 SPRING HILL ROAD
SUITE 400City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DONOR DATABASE SERVICES

Candidate Name

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB21B.I3448

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

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

250.00

250.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. GROW THE MAJORITY

Mailing Address 228 S WASHINGTON ST STE 115

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
CONTRIBUTION REFUND

010

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2026

FEC Identification Number

C C00858373

Transaction ID : SB22.I3560

Amount of Each Disbursement this Period

5000.00

☐ Memo Item THOMAS MCINERNEY
RECEIVED 09/30/25

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

5000.00

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

5000.00

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

CLF

Full Name (Last, First, Middle Initial)

A. ALASKANS FOR NICK BEGICH

Mailing Address PO BOX 671710

City
CHUGIAKState
AKZip Code
99567Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

BEGICH, NICHOLAS, , III

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: AK

District: 00

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7		2	0	2	6		

FEC Identification Number

C C00792341

Transaction ID : SB23.I3438

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BRIAN FITZPATRICK FOR ALL OF US

Mailing Address PO BOX 939

City
LANGHORNEState
PAZip Code
19047Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

FITZPATRICK, BRIAN, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: PA

District: 01

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7		2	0	2	6		

FEC Identification Number

C C00607416

Transaction ID : SB23.I3442

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CISCOMANI FOR CONGRESS

Mailing Address PO BOX 35103

City
TUCSONState
AZZip Code
85740-5103Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

CISCOMANI, JUAN, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ

District: 06

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7		2	0	2	6		

FEC Identification Number

C C00786194

Transaction ID : SB23.I3446

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

15000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. ELECTGABEEVANS.COM

Mailing Address PO BOX 350608

City
WESTMINSTERState
COZip Code
80035

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Candidate Name

EVANS, TIMOTHY, GABRIEL JOSEPH, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CO

District: 08

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00849844

Transaction ID : SB23.I3559

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HUIZENGA FOR CONGRESS

Mailing Address PO BOX 254

City
ZEELANDState
MIZip Code
49464

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Candidate Name

HUIZENGA, WILLIAM, P, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: MI

District: 04

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00459297

Transaction ID : SB23.I3475

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. IOWANS FOR ZACH NUNN

Mailing Address PO BOX 8036

City
DES MOINESState
IAZip Code
50301

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Candidate Name

NUNN, ZACH, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IA

District: 03

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00784389

Transaction ID : SB23.I3478

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. KEAN FOR CONGRESS INC

Mailing Address PO BOX 999

City
EDISONState
NJZip Code
08818

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Candidate Name

KEAN, THOMAS, H., , JR.

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ

District: 07

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00703058

Transaction ID : SB23.I3484

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KIGGANS FOR CONGRESS

Mailing Address P.O. BOX 5042

City
VIRGINIA BEACHState
VAZip Code
23471

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Candidate Name

KIGGANS, JENNIFER, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: VA

District: 02

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00776120

Transaction ID : SB23.I3485

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LAWLER FOR CONGRESS, INC.

Mailing Address PO BOX 137

City
CHAPPAQUAState
NYZip Code
10514

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Candidate Name

LAWLER, MICHAEL, VINCENT, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 17

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00815415

Transaction ID : SB23.I3483

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. MACKENZIE FOR CONGRESSMailing Address 2 CIVIC CENTER DRIVE
UNIT 4338City
SAN RAFAELState
CAZip Code
94913-5703

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

MACKENZIE, LAURIE, JOHN, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 04

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6		

FEC Identification Number

C C00911503

Transaction ID : SB23.I3486

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MILLER-MEEKS FOR CONGRESS

Mailing Address PO BOX 33

City
OTTUMWAState
IAZip Code
52501

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

MILLER-MEEKS, MARIANNETTE, JANE, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: IA

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6		

FEC Identification Number

C C00558825

Transaction ID : SB23.I3487

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MONICA FOR CONGRESS

Mailing Address PO BOX 4605

City
MCALLENState
TXZip Code
78502-4605

Purpose of Disbursement

CONTRIBUTION

011

Candidate Name

DE LA CRUZ, MONICA, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX

District: 15

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6		

FEC Identification Number

C C00765719

Transaction ID : SB23.I3474

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

15000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. PATRIOTS FOR PERRYMailing Address 4075 LINGLESTOWN ROAD
PMB 119City
HARRISBURGState
PAZip Code
17112

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Candidate Name

PERRY, SCOTT, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District: 10

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00510164

Transaction ID : SB23.I3507

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROB FOR PA

Mailing Address 11 DOCK ST BOX 971

City
PITTSBURGHState
PAZip Code
15601

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Candidate Name

BRESNAHAN, ROB, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA

District: 08

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00852137

Transaction ID : SB23.I3481

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TOM BARRETT FOR CONGRESS

Mailing Address PO BOX 15221

City
LANSINGState
MIZip Code
48901

Purpose of Disbursement

CONTRIBUTION

011

Category/
Type

Candidate Name

BARRETT, THOMAS, MORE, ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: MI

District: 07

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00793976

Transaction ID : SB23.I3488

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

15000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. VALADAO FOR CONGRESSMailing Address 5132 NORTH PALM AVENUE
#227City
FRESNOState
CAZip Code
93704Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

VALADAO, DAVID, . .

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 22

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00499392

Transaction ID : SB23.I3495

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VAN ORDEN FOR CONGRESS

Mailing Address PO BOX 1836

City
LA CROSSEState
WIZip Code
54602Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

VAN ORDEN, DERRICK, F., MR.,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify)

State: WI

District: 03

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00742007

Transaction ID : SB23.I3496

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NRCC

Mailing Address 320 FIRST STREET SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	7			2	0	2	6	

FEC Identification Number

C C00075820

Transaction ID : SB23.I3479

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

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

25000.00

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

100000.00

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3514

Amount of Each Disbursement this Period

9.59

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. CAPITOL COMPUTER EXCHANGEMailing Address 200 HARRY S TRUMAN PKWY
210City
ANNAPOLISState
MDZip Code
21401Purpose of Disbursement
COMPUTER SERVICES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3443

Amount of Each Disbursement this Period

83.95

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. FIRST NATIONAL BANK

Mailing Address PO BOX 2557

City
OMAHAState
NEZip Code
68103Purpose of Disbursement
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3503

Amount of Each Disbursement this Period

2309.33

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

2402.87

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. CLOUDFLARE

Mailing Address 101 TOWNSEND ST

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
COMPUTER SERVICES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3546

Amount of Each Disbursement this Period

106.00

☒ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. GODADDY.COMMailing Address 14455 NORTH HAYDEN ROAD
SUITE 219City
SCOTTSDALEState
AZZip Code
85260Purpose of Disbursement
DOMAIN NAME SERVICES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3547

Amount of Each Disbursement this Period

225.29

☒ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. MICROSOFT

Mailing Address ONE MICROSOFT WAY

City
REDMONDState
WAZip Code
98052Purpose of Disbursement
COMPUTER SERVICES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3548

Amount of Each Disbursement this Period

962.79

☒ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

0.00

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. WP ENGINEMailing Address 504 LAVACA STREET
SUITE 1000City
AUSTINState
TXZip Code
78701Purpose of Disbursement
COMPUTER SERVICES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3550

Amount of Each Disbursement this Period

901.00

☒ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN

City
MCLEANState
VAZip Code
22102Purpose of Disbursement
MERCHANT FEES

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3501

Amount of Each Disbursement this Period

70.50

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. RIGHT COUNTRY LISTS

Mailing Address 117 NORTH SAINT ASAPH STREET

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
FUNDRAISING CONSULTING

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3497

Amount of Each Disbursement this Period

17.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

87.50

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

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3515

Amount of Each Disbursement this Period

17.77

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. RIGHT COUNTRY LISTS

Mailing Address 117 NORTH SAINT ASAPH STREET

City
ALEXANDRIAState
VAZip Code
22314

Purpose of Disbursement

FUNDRAISING CONSULTING

Candidate Name

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3		2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3498

Amount of Each Disbursement this Period

17.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3		2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3516

Amount of Each Disbursement this Period

11.42

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

46.19

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

CLF

Full Name (Last, First, Middle Initial)

A. RIGHT COUNTRY LISTS

Mailing Address 117 NORTH SAINT ASAPH STREET

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
FUNDRAISING CONSULTING

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 05 2026

FEC Identification Number

C

Transaction ID : SB29.I3499

Amount of Each Disbursement this Period

17.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 05 2026

FEC Identification Number

C

Transaction ID : SB29.I3517

Amount of Each Disbursement this Period

7.14

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. STRATEGIC ADVANCE SERVICES LLCMailing Address 611 PENNSYLVANIA AVENUE SE
SUITE 267City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
TRAVEL AND EVENT PLANNING SERVICES

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 06 2026

FEC Identification Number

C

Transaction ID : SB29.I3492

Amount of Each Disbursement this Period

49886.29

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

49910.43

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

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

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3518

Amount of Each Disbursement this Period

40.38

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3519

Amount of Each Disbursement this Period

5.38

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. 1892 LLC

Mailing Address PO BOX 1832

City
GALLATINState
TNZip Code
37066

Purpose of Disbursement

STRATEGY CONSULTING

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3436

Amount of Each Disbursement this Period

50000.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

50045.76

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. CMDIMailing Address 1593 SPRING HILL ROAD
SUITE 400City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DONOR DATABASE SERVICES

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3447

Amount of Each Disbursement this Period

635.15

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. FINANCE STRATEGIES GROUP LLCMailing Address 2024 3RD AVENUE N
SUITE 211City
BIRMINGHAMState
ALZip Code
35203Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3476

Amount of Each Disbursement this Period

59500.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. GUIDANT POLLING AND STRATEGY LLC

Mailing Address PO BOX 1505

City
BOISEState
IDZip Code
83701Purpose of Disbursement
POLLING/SURVEY

005

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3480

Amount of Each Disbursement this Period

50000.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

1	1	0	1	3	5	.	1	5
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. PRIME MEDIA PARTNERS LLCMailing Address 4201 WILSON BOULEVARD
110-126City
ARLINGTONState
VAZip Code
22203Purpose of Disbursement
STRATEGY CONSULTING

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3491

Amount of Each Disbursement this Period

50000.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	8			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3520

Amount of Each Disbursement this Period

8.72

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. THREE ARBOR INSURANCEMailing Address 2828 OLD 280 COURT
SUITE 126City
BIRMINGHAMState
ALZip Code
35243Purpose of Disbursement
INSURANCE PREMIUM

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3494

Amount of Each Disbursement this Period

43897.94

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

93906.66

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

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	9			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3521

Amount of Each Disbursement this Period

6.93

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. SRCP MEDIA INCMailing Address 201 NORTH UNION STREET
SUITE 200City
ALEXANDRIAState
VAZip Code
22314

Purpose of Disbursement

STRATEGY CONSULTING

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3512

Amount of Each Disbursement this Period

50000.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3522

Amount of Each Disbursement this Period

0.79

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

50007.72

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3523

Amount of Each Disbursement this Period

21.60

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3524

Amount of Each Disbursement this Period

0.78

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3525

Amount of Each Disbursement this Period

8.34

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

30.72

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

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. AMERICA RISING LLCMailing Address 1500 WILSON BOULEVARD
5TH FLOORCity
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
RESEARCH SERVICES

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3439

Amount of Each Disbursement this Period

50625.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3526

Amount of Each Disbursement this Period

13.08

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			1	7			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3527

Amount of Each Disbursement this Period

8.47

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

50646.55

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. AM STRATEGIESMailing Address 701 S HOWARD AVE
#106-919City
TAMPAState
FLZip Code
33606Purpose of Disbursement
STRATEGY CONSULTING

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3506

Amount of Each Disbursement this Period

50000.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3528

Amount of Each Disbursement this Period

26.48

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. DEEP ROOT ANALYTICS LLCMailing Address 1600 WILSON BOULEVARD
SUITE 300City
ARLINGTONState
VAZip Code
22209Purpose of Disbursement
POLLING/SURVEY

005

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3473

Amount of Each Disbursement this Period

90000.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

140026.48

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3529

Amount of Each Disbursement this Period

4.77

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. AMERICAN ACTION NETWORKMailing Address 1747 PENNSYLVANIA AVENUE NW
5TH FLOORCity
WASHINGTONState
DCZip Code
20006

Purpose of Disbursement

REIMBURSEMENT FOR SHARED LABOR, RENT, UTILITIES

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3440

Amount of Each Disbursement this Period

49546.61

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3530

Amount of Each Disbursement this Period

15.11

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

49566.49

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. CONSTANGY, HERBERT, WILLIAM, , III

Mailing Address 604 E ALEXANDRIA BLVD

City
ALEXANDRIAState
VAZip Code
22301Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	3			2	0	2	6		

FEC Identification Number

C Transaction ID : SB29.I3445

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONCEPT MARKETING AND BRANDING LLC

Mailing Address 4339 RAWLINGS STREET

City
DALLASState
TXZip Code
75219Purpose of Disbursement
ADVERTISING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	3			2	0	2	6		

FEC Identification Number

C Transaction ID : SB29.I3505

Amount of Each Disbursement this Period

20791.73

NON-CONTRIBUTION ACCOUNT

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DONORBUREAU

Mailing Address 1900 N CULPEPPER STREET

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	3			2	0	2	6		

FEC Identification Number

C Transaction ID : SB29.I3509

Amount of Each Disbursement this Period

32.00

NON-CONTRIBUTION ACCOUNT

☐ Memo Item

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

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

25823.73

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

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☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	3			2	0	2	6		

FEC Identification Number

C

Transaction ID : SB29.I3531

Amount of Each Disbursement this Period

22.23

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. 1892 LLC

Mailing Address PO BOX 1832

City
GALLATINState
TNZip Code
37066

Purpose of Disbursement

POLLING/SURVEY

Candidate Name

005

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3437

Amount of Each Disbursement this Period

68540.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3532

Amount of Each Disbursement this Period

3.35

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

68565.58

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)

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. DONORBUREAU

Mailing Address 1900 N CULPEPPER STREET

City
ARLINGTON

State
VA

Zip Code
22207

Purpose of Disbursement
FUNDRAISING CONSULTING

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 27 / 2026

FEC Identification Number

C

Transaction ID : SB29.I3510

Amount of Each Disbursement this Period

16.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLC

Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B561

City
CHEYENNE

State
WY

Zip Code
82001

Purpose of Disbursement
MERCHANT FEES

004

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 27 / 2026

FEC Identification Number

C

Transaction ID : SB29.I3533

Amount of Each Disbursement this Period

85.87

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. CROSBY OTTENHOFF GROUP LLC

Mailing Address 611 PENNSYLVANIA AVE SE
267

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
ACCOUNTING AND COMPLIANCE SERVICES

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 28 / 2026

FEC Identification Number

C

Transaction ID : SB29.I3471

Amount of Each Disbursement this Period

9738.75

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

9840.62

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. FINANCE STRATEGIES GROUP LLCMailing Address 2024 3RD AVENUE N
SUITE 211City
BIRMINGHAMState
ALZip Code
35203Purpose of Disbursement
FUNDRAISING CONSULTING

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	8			2	0	2	6	

FEC Identification Number

C

Transaction ID : SB29.I3477

Amount of Each Disbursement this Period

169000.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. PANTHEON SYSTEMS INC

Mailing Address 717 CALIFORNIA STREET

City
SAN FRANCISCOState
CAZip Code
94108Purpose of Disbursement
SOFTWARE

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	8			2	0	2	6	

FEC Identification Number

C

Transaction ID : SB29.I3490

Amount of Each Disbursement this Period

3625.20

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	8			2	0	2	6	

FEC Identification Number

C

Transaction ID : SB29.I3534

Amount of Each Disbursement this Period

10.65

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

172635.85

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)

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. DONORBUREAU

Mailing Address 1900 N CULPEPPER STREET

City
ARLINGTON

State
VA

Zip Code
22207

Purpose of Disbursement
FUNDRAISING CONSULTING

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 29 / 2026

FEC Identification Number

C

Transaction ID : SB29.I3511

Amount of Each Disbursement this Period

16.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLC

Mailing Address 1603 CAPITOL AVENUE
SUITE 413-B561

City
CHEYENNE

State
WY

Zip Code
82001

Purpose of Disbursement
MERCHANT FEES

004

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 29 / 2026

FEC Identification Number

C

Transaction ID : SB29.I3535

Amount of Each Disbursement this Period

51.12

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. COVINGTON, COLEMAN, , ,

Mailing Address 1000 1ST STREET SE
APARTMENT 716

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
STRATEGY CONSULTING

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 30 / 2026

FEC Identification Number

C

Transaction ID : SB29.I3451

Amount of Each Disbursement this Period

4000.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

4067.12

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

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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. JONES DAY

Mailing Address 51 LOUISIANA AVENUE NW

City
WASHINGTONState
DCZip Code
20001

Purpose of Disbursement

LEGAL SERVICES

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	6	

FEC Identification Number

C

Transaction ID : SB29.I3482

Amount of Each Disbursement this Period

1906.25

☐ Memo Item

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0			2	0	2	6	

FEC Identification Number

C

Transaction ID : SB29.I3536

Amount of Each Disbursement this Period

122.73

☐ Memo Item

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3537

Amount of Each Disbursement this Period

3.73

☐ Memo Item

NON-CONTRIBUTION ACCOUNT

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

2032.71

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

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

CLF

Full Name (Last, First, Middle Initial)

A. FIRST NATIONAL BANK

Mailing Address PO BOX 2557

City
OMAHAState
NEZip Code
68103

Purpose of Disbursement

CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3504

Amount of Each Disbursement this Period

2859.32

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. CLOUDFLARE

Mailing Address 101 TOWNSEND ST

City
SAN FRANCISCOState
CAZip Code
94107

Purpose of Disbursement

COMPUTER SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3552

Amount of Each Disbursement this Period

106.00

☒ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. MICROSOFT

Mailing Address ONE MICROSOFT WAY

City
REDMONDState
WAZip Code
98052

Purpose of Disbursement

COMPUTER SERVICES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3553

Amount of Each Disbursement this Period

1003.32

☒ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

2859.32

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. TRAVEL BY KATIE LLC

Mailing Address PO BOX 144

City
KUNAState
IDZip Code
83634

Purpose of Disbursement

TRAVEL

Candidate Name

002

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3556

Amount of Each Disbursement this Period

750.00

☒ Memo Item

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WP ENGINEMailing Address 504 LAVACA STREET
SUITE 1000City
AUSTINState
TXZip Code
78701

Purpose of Disbursement

COMPUTER SERVICES

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3555

Amount of Each Disbursement this Period

901.00

☒ Memo Item

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN

City
MCLEANState
VAZip Code
22102

Purpose of Disbursement

MERCHANT FEES

Candidate Name

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3502

Amount of Each Disbursement this Period

70.50

☐ Memo Item

NON-CONTRIBUTION ACCOUNT

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

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

70.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. RIGHT COUNTRY LISTS

Mailing Address 117 NORTH SAINT ASAPH STREET

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
FUNDRAISING CONSULTING

003

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 04 2026

FEC Identification Number

C

Transaction ID : SB29.I3500

Amount of Each Disbursement this Period

51.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 04 2026

FEC Identification Number

C

Transaction ID : SB29.I3538

Amount of Each Disbursement this Period

57.02

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

004

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 05 2026

FEC Identification Number

C

Transaction ID : SB29.I3539

Amount of Each Disbursement this Period

5.96

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

113.98

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3540

Amount of Each Disbursement this Period

18.51

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. AMERICAN ACTION NETWORKMailing Address 1747 PENNSYLVANIA AVENUE NW
5TH FLOORCity
WASHINGTONState
DCZip Code
20006

Purpose of Disbursement

REIMBURSEMENT FOR SHARED LABOR, RENT, UTILITIES

Candidate Name

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3441

Amount of Each Disbursement this Period

52345.92

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. CMDIMailing Address 1593 SPRING HILL ROAD
SUITE 400City
TYSONS CORNERState
VAZip Code
22182

Purpose of Disbursement

DONOR DATABASE SERVICES

Candidate Name

003

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3449

Amount of Each Disbursement this Period

602.90

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

52967.33

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. CONSTON COMMUNICATIONS INC

Mailing Address 6653 BARNABY STREET NW

City
WASHINGTONState
DCZip Code
20015Purpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C Transaction ID : SB29.I3508

Amount of Each Disbursement this Period

50000.00

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C Transaction ID : SB29.I3541

Amount of Each Disbursement this Period

10.51

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. STRATEGIC ADVANCE SERVICES LLCMailing Address 611 PENNSYLVANIA AVENUE SE
SUITE 267City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
TRAVEL AND EVENT PLANNING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C Transaction ID : SB29.I3493

Amount of Each Disbursement this Period

109684.01

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

159694.52

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3542

Amount of Each Disbursement this Period

4.33

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3543

Amount of Each Disbursement this Period

29.65

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C. CAPITOL COMPUTER EXCHANGEMailing Address 200 HARRY S TRUMAN PKWY
210City
ANNAPOLISState
MDZip Code
21401

Purpose of Disbursement

COMPUTER SERVICES

Candidate Name

001

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3444

Amount of Each Disbursement this Period

95.40

☐ Memo Item NON-CONTRIBUTION ACCOUNT

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

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

129.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

CLF

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3544

Amount of Each Disbursement this Period

2.17

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICES, LLCMailing Address 1603 CAPITOL AVENUE
SUITE 413-B561City
CHEYENNEState
WYZip Code
82001

Purpose of Disbursement

MERCHANT FEES

Candidate Name

004

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB29.I3545

Amount of Each Disbursement this Period

8.46

☐ Memo Item NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

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

10.63

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

1095623.79

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 93 OF 96
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CLF			FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if ☐ 24-hour report ☐ 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee SWING STRATEGIES ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 04 / 2026	
Mailing Address 925 UNIVERSITY AVE			Amount 19670.49	
City SACRAMENTO	State CA	Zip Code 95825	Transaction ID : SE24.3429 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 01 / 2026	
Purpose of Expenditure DIRECT MAIL		Category/ Type 004		
Name of Federal Candidate: VALADAO, DAVID, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 124962.99			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee SWING STRATEGIES ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 07 / 2026	
Mailing Address 925 UNIVERSITY AVE			Amount 19335.15	
City SACRAMENTO	State CA	Zip Code 95825	Transaction ID : SE24.3430 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 01 / 2026	
Purpose of Expenditure DIRECT MAIL		Category/ Type 004		
Name of Federal Candidate: VALADAO, DAVID, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 124962.99			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 39005.64 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature CROSBY, CALEB, , ,			Date M M / D D / Y Y Y Y Y Y 05 / 06 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 95 OF 96
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CLF			FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee SWING STRATEGIES ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 12 / 2026	
Mailing Address 925 UNIVERSITY AVE			Amount 16725.30	
City SACRAMENTO	State CA	Zip Code 95825	Transaction ID : SE24.3433 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 08 / 2026	
Purpose of Expenditure DIRECT MAIL		Category/ Type 004		
Name of Federal Candidate: VILLEGAS, RANDY, , , ☐ Support ☒ Oppose			Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 124962.99			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
Full Name of Payee SWING STRATEGIES ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 14 / 2026	
Mailing Address 925 UNIVERSITY AVE			Amount 16585.80	
City SACRAMENTO	State CA	Zip Code 95825	Transaction ID : SE24.3434 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 11 / 2026	
Purpose of Expenditure DIRECT MAIL		Category/ Type 004		
Name of Federal Candidate: VALADAO, DAVID, , , ☒ Support ☐ Oppose			Office Sought: ☒ House District: 22 ☐ President ☐ Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought 124962.99			Disbursement For: ☒ Primary ☐ General 2026 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 33311.10 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>CROSBY, CALEB, , ,</u>			Date M M / D D / Y Y Y Y Y Y 05 / 13 / 2026	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 96 OF 96
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) CLF		FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if ☐ 24-hour report ☐ 48-hour report		New report ☐ Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee SWING STRATEGIES ☐ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 05 / 14 / 2026	
Mailing Address 925 UNIVERSITY AVE		Amount 16585.80	
City SACRAMENTO	State CA	Zip Code 95825	Transaction ID : SE24.3435 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 11 / 2026
Purpose of Expenditure DIRECT MAIL		Category/ Type 004	
Name of Federal Candidate: VILLEGAS, RANDY, , , ☐ Support ☒ Oppose		Office Sought: ☒ House ☐ Senate ☐ President District: 22 State: CA	
Calendar Year-To-Date Per Election for Office Sought 124962.99		Disbursement For: ☒ Primary ☐ General ☐ Other (specify) ▶	
Full Name of Payee ☐ Memo Item		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address		Amount 	
City	State	Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate: ☐ Support ☐ Oppose		Office Sought: ☐ House ☐ Senate ☐ President District: State:	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures 16585.80 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures 124962.99			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature CROSBY, CALEB, , ,		Date M M / D D / Y Y Y Y Y Y 05 / 14 / 2026	