

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

HAMPTON HARRIS FOR CONGRESS

ADDRESS (number and street)

PO BOX 249

Check if different
than previously
reported. (ACC)

LOWNDESBORO

AL

36752-0249

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00934398

3. IS THIS
REPORT☐ NEW
(N)

OR

☒ AMENDED
(A)

STATE ▼ DISTRICT

AL

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
11 / 03 / 2026in the
State of

AL

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

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

through

M M / D D / Y Y Y Y
04 / 29 / 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 HARRIS, HAMPTON, , ,

Signature of Treasurer

HARRIS, HAMPTON, , ,

Date

M M / D D / Y Y Y Y
06 / 15 / 2026

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

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

HAMPTON HARRIS FOR CONGRESS

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	4		2	9		2	0	2	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	5664.98	9208.91
(b) Total Contribution Refunds (from Line 20(d))	1.00	1.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	5663.98	9207.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3825.30	8833.23
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	3825.30	8833.23
8. Cash on Hand at Close of Reporting Period (from Line 27).....	205384.68	
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)	221732.90	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

HAMPTON HARRIS FOR CONGRESS

Report Covering the Period:

From:

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

To:

M M / D D / Y Y Y Y
04 / 29 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

3125.00

5045.51

(ii) Unitemized

2289.98

3913.40

(iii) TOTAL of contributions
from individuals ▶

5414.98

8958.91

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

250.00

250.00

(d) The Candidate

0.00

0.00

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

5664.98

9208.91

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

205510.00

(b) All Other Loans.....

0.00

0.00

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

0.00

205510.00

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

0.00

0.00

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

0.00

0.00

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

5664.98

214718.91

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3825.30	8833.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1.00	1.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1.00	1.00
21. OTHER DISBURSEMENTS	500.00	500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	4326.30	9334.23

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	204046.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5664.98
25. SUBTOTAL (add Line 23 and Line 24).....	209710.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	4326.30
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	205384.68

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 16

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

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)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

ASHURST, MELISSA, , ,

A.

Mailing Address 707 CAPTAIN O'NEAL DRIVE

City

FAIRHOPE

State

AL

Zip Code

38532

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A34A4C53F6FAA4FCD9F6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FERRIER, KEVIN, , ,

B.

Mailing Address 3826 UPLAND DR

City

MARIETTA

State

GA

Zip Code

30066-3063

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

PLUMBER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A39BB6EC555324C0C923

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KEENER, FREDRICK, , ,

C.

Mailing Address 7255 BULL PEN CIR

City

MOBILE

State

AL

Zip Code

36695

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 18 2026

Transaction ID : AB901D1747F2E4594B26

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1750.00

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

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

PAGE 6 OF 16

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESSFull Name (Last, First, Middle Initial)
WINREDMailing Address 4250 FAIRFAX DR
STE 600City
ARLINGTONState
VAZip Code
22203-1665FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3400.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	6

Transaction ID : A1DFF8F2252BD44A2890

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)
PRICKETT, FAY, , ,

Mailing Address 510 GOUDE LN

City
CECILState
ALZip Code
36013-3630FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	6

Transaction ID : A8396DDFB0B3E44D6ACB

Amount of Each Receipt this Period

100.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
PRICKETT, FAY, , ,

Mailing Address 510 GOUDE LN

City
CECILState
ALZip Code
36013-3630FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	6

Transaction ID : AD99F5CB3E2AE43DF9BE

Amount of Each Receipt this Period

75.00

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

175.00

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

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

PAGE 7 OF 16

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

RABREN, CHARLENE, , ,

A.

Mailing Address 915 MERIWETHER RD

City

PIKE ROAD

State

AL

Zip Code

36064-1718

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	6	

Transaction ID : AF274E2DDC26B436CA1E

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

WESTBROOK, EDWIN, , , JR.

B.

Mailing Address 1023 FLOWERS RD

City

CECIL

State

AL

Zip Code

36013-3509

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	6	

Transaction ID : AD66F42AEEFD14A1FBC5

Amount of Each Receipt this Period

250.00



Memo Item

Full Name (Last, First, Middle Initial)

WHITT, SHARON, , ,

C.

Mailing Address 480 TOWNE LAKE PL

City

MONTGOMERY

State

AL

Zip Code

36117

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

782.78

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	6	

Transaction ID : A28ECA70D8DB74AC0909

Amount of Each Receipt this Period

200.00



Memo Item

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

700.00

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

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

PAGE 8 OF 16

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAMS, BARBARA, , ,

A. Mailing Address 8432 WATER OAK CTCity
MONTGOMERYState
ALZip Code
36117-6806FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A70D652B0A2194C91AAF

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

500.00

3125.00

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

PAGE 9 OF 16

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

REPUBLICAN CLUB OF CENTRAL ALABAMA

A. Mailing Address 1754 EDINBURGH ST

City
PRATTVILLEState
ALZip Code
36066-3614FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A95418B449A4A4AC4B2C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

250.00

250.00

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

PAGE 10 OF 16

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR

City
FORT WORTHState
TXZip Code
76155-1801Purpose of Disbursement
TRAVEL

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

936.21

Transaction ID : B34A6119C52114C10AFE

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BUFFALO WILD WINGS

Mailing Address 3 GLENLAKE PKWY NE

City
ATLANTAState
GAZip Code
30328-3447Purpose of Disbursement
FOOD AND BEVERAGE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

886.46

Transaction ID : B9F071EA9C4484F4C8C1

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CALLAHAN, GREG, , ,

Mailing Address PO BOX 249

City
LOWNDESBOROState
ALZip Code
36752-0249Purpose of Disbursement
SIGN PRINTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

445.38

Transaction ID : BDE21F5DF89124E8D87A

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

2268.05

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

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

PAGE 11 OF 16

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DAVIS DIRECT

Mailing Address 1241 NEWELL PKWY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	2	6

City
MONTGOMERYState
ALZip Code
36110-3212

FEC Identification Number

C

Purpose of Disbursement
PRINTING

001

Amount of Each Disbursement this Period

26.20

Transaction ID : B31B3288B028B416E89E

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. MAILCHIMP

Mailing Address 675 PONCE DE LEON AVE NE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	6

City
ATLANTAState
GAZip Code
30308-1829

FEC Identification Number

C

Purpose of Disbursement
EMAILING

001

Amount of Each Disbursement this Period

75.00

Transaction ID : BFBF058000E004D19B37

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. REED INGRAM-SWEET

Mailing Address 85 MERIWETHER RD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	6

City
PIKE ROADState
ALZip Code
36064-1775

FEC Identification Number

C

Purpose of Disbursement
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

856.95

Transaction ID : B2B381D2E793D4BC5843

☐ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

958.15

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

3226.20

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

PAGE 12 OF 16

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

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NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MOWA CHOCTAW POWWOW COMMITTEE

Mailing Address 1080 RED FOX RD W

Date of Disbursement

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

City
MOUNT VERNONState
ALZip Code
36560-2624

FEC Identification Number

Purpose of Disbursement
DONATIONS

012

Category/
Type

Amount of Each Disbursement this Period

Transaction ID : BE9C44089707E4FEC886

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

City

State

Zip Code

FEC Identification Number

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

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

PAGE 13 OF 16

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

NAME OF COMMITTEE (In Full)

Transaction ID : CEF2F02B92AAD4A25B40

HAMPTON HARRIS FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRIS, HAMPTON, , ,

Mailing Address

P.O. BOX 249

City

LOWNDESBORO

State

AL

ZIP Code

36752-0249

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 29 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 14 OF 16

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C9D7C89C789114BECB05

HAMPTON HARRIS FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRIS, HAMPTON, , ,

Mailing Address

P.O. BOX 249

City

LOWNDESBORO

State

AL

ZIP Code

36752-0249

☒ Personal Funds of the Candidate

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 19 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

200000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 15 OF 16

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : C2DC83B9301724BE6845

HAMPTON HARRIS FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

HARRIS, HAMPTON, , ,

Mailing Address

P.O. BOX 249

City

LOWNDESBORO

State

AL

ZIP Code

36752-0249

☒ Personal Funds of the Candidate

Original Amount of Loan

510.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

510.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 14 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

510.00

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

205510.00

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

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

PAGE 16 OF 16

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

NAME OF COMMITTEE (In Full)

HAMPTON HARRIS FOR CONGRESS

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

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

MILEAGE, DATA AND FILING FEES

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

13669.45

Transaction ID : DB21AD8A79A344ABCA51

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13669.45

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

HARRIS, HAMPTON, , ,

Nature of Debt (Purpose):

MILEAGE

Mailing Address P.O. BOX 249

City

LOWNDESBORO

State

AL

Zip Code

36752-0249

Outstanding Balance Beginning This Period

0.00

Transaction ID : DD7290CF2EE88432D8A0

Amount Incurred This Period

2553.45

Payment This Period

0.00

Outstanding Balance at Close of This Period

2553.45

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

16222.90

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

16222.90

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

205510.00

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

221732.90