

**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

Kara King for Congress

ADDRESS (number and street)

PO Box 30844

Check if different
than previously
reported. (ACC)

Bethesda

MD

20824

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00923391

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

TX

10

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

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

through

M M / D D / Y Y Y Y
03 / 31 / 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

Martin, Steve, , ,

Signature of Treasurer

Martin, Steve, , ,

Date

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

Kara King for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		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))	1041.02	131138.66
(b) Total Contribution Refunds (from Line 20(d))	35946.48	38446.48
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	- 34905.46	92692.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	19052.87	86967.15
(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))	19052.87	86967.15
8. Cash on Hand at Close of Reporting Period (from Line 27)	5725.03	
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	

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

Kara King for Congress

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 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).....

1041.02

119117.09

(ii) Unitemized

0.00

3475.25

(iii) TOTAL of contributions
from individuals ▶

1041.02

122592.34

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

0.00

8546.32

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

1041.02

131138.66

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

100000.00

(b) All Other Loans.....

0.00

0.00

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

0.00

100000.00

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)..... ▶

1041.02

231138.66

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.....	19052.87	86967.15
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	100000.00	100000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	100000.00	100000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	35946.48	38446.48
(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)).....	35946.48	38446.48
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	154999.35	225413.63

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	159683.36
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1041.02
25. SUBTOTAL (add Line 23 and Line 24).....	160724.38
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	154999.35
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5725.03

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION**Form/Schedule: F3N****Transaction ID :**

THE COMMITTEE HAS DEMONSTRATED THE NECESSARY STEPS TO ESTABLISH BEST EFFORTS TO OBTAIN AND DISCLOSE THE FULL IDENTIFICATION OF ALL INDIVIDUALS WHO CONTRIBUTE IN EXCESS OF \$200 IN A CALENDAR YEAR. THESE EFFORTS INCLUDE A CLEAR REQUEST WITH THE ORIGINAL SOLICITATION, FOLLOWED BY A REQUEST FOR MISSING INFORMATION LETTER WITHIN 30 DAYS, WHICH CLEARLY ASKS FOR THE MISSING INFORMATION WITHOUT SOLICITING A CONTRIBUTION. THE LETTER READS: FEDERAL LAW REQUIRES US TO MAKE OUR BEST EFFORTS TO COLLECT AND REPORT THE NAME, MAILING ADDRESS, OCCUPATION AND NAME OF EMPLOYER OF ALL INDIVIDUALS WHO CONTRIBUTE IN EXCESS OF \$200 IN A CALENDAR YEAR. WE THEN ENCLOSE A SELF-ADDRESSED ENVELOPE AND INCLUDE A TELEPHONE NUMBER TO REACH THE COMMITTEE WITH ANY QUESTIONS. A SECOND REQUEST FOR MISSING INFORMATION LETTER IS SENT IF WE DO NOT RECEIVE THE INFORMATION IN A TIMELY MANNER. IN THE EVENT THAT WE RECEIVE ADDITIONAL INFORMATION, WE WILL AMEND THE APPROPRIATE REPORT TO REFLECT THE ADDITIONAL DISCLOSURES.

Form/Schedule:**Transaction ID:**

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 18

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

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

Burke, Mike, , ,

A.

Mailing Address 805 Mariner

City

Lakeway

State

TX

Zip Code

78734

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Steel manufacturing

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y
01 06 2026

Transaction ID : SA11AI.4171

Amount of Each Receipt this Period

1041.02

☐ Memo Item

Earmarked contribution through WinRed

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address 4250 FAIRFAX DR
STE 600

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y
01 06 2026

Transaction ID : SA11AI.4174

Amount of Each Receipt this Period

1041.02

☒ Memo Item

Earmarked. Conduit contribution limit not affected

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

1041.02

1041.02

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

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

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. AnedotMailing Address 3723 Greenville Ave
Ste 41002City
DallasState
TXZip Code
75206Purpose of Disbursement
CREDIT E-Merchant Fees

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	1		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

- 25.00

Transaction ID : SB17.4163

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CFS, Compliance, , ,

Mailing Address PO Box 30844

City
BethesdaState
MDZip Code
20824Purpose of Disbursement
Compliance Consulting

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	1		1	6		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2275.00

Transaction ID : SB17.4126

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CFS, Compliance, , ,

Mailing Address PO Box 30844

City
BethesdaState
MDZip Code
20824Purpose of Disbursement
E-merchant Fees

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	2		1	2		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

5.02

Transaction ID : SB17.4178

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

2255.02

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)

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

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. CFS, Compliance, , ,

Mailing Address PO Box 30844

City
BethesdaState
MDZip Code
20824Purpose of Disbursement
Compliance Consulting

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	3		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4978.86

Transaction ID : SB17.4192

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Engage RightMailing Address 1530 Sun City Blvd
Suite 120City
GeorgetownState
TXZip Code
78633Purpose of Disbursement
Strategic Campaign Consulting

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	1		1	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.4119

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Engage RightMailing Address 1530 Sun City Blvd
Suite 120City
GeorgetownState
TXZip Code
78633Purpose of Disbursement
Strategic Campaign Consulting

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	1		1	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4121

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

9978.86

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)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. Engage RightMailing Address 1530 Sun City Blvd
Suite 120City
GeorgetownState
TXZip Code
78633Purpose of Disbursement
Strategic Campaign Consulting

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	1		1	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.4122

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Engage RightMailing Address 1530 Sun City Blvd
Suite 120City
GeorgetownState
TXZip Code
78633Purpose of Disbursement
Strategic Campaign Consulting

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	1		1	5		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

426.37

Transaction ID : SB17.4123

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. King, Kara, , ,

Mailing Address PO Box 30844

City
BethesdaState
MDZip Code
20824Purpose of Disbursement
Reimbursement - see memo items

001

Candidate Name

Category/
Type

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State: TX

District: 10

Date of Disbursement

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

FEC Identification Number

C H6TX10247

Amount of Each Disbursement this Period

882.22

Transaction ID : SB17.4184

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

3808.59

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

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

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

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. Numinar

Mailing Address 1201 Wilson Blvd

Date of Disbursement

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

City
ArlingtonState
VAZip Code
22209

FEC Identification Number

C

Purpose of Disbursement
Software Expense

001

Amount of Each Disbursement this Period

712.10

Transaction ID : SB17.4184.1

☒ 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. Kornegay Consulting

Mailing Address 211 W. Carolinian Cir

Date of Disbursement

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

City
Nags HeadState
NCZip Code
27959

FEC Identification Number

C

Purpose of Disbursement
VOID of 12/23 payment, see reissued payment 1/5

003

Amount of Each Disbursement this Period

- 3750.00

Transaction ID : SB17.4116

☐ 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. Kornegay Consulting

Mailing Address 211 W. Carolinian Cir

Date of Disbursement

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

City
Nags HeadState
NCZip Code
27959

FEC Identification Number

C

Purpose of Disbursement
Fundraising Consulting

003

Amount of Each Disbursement this Period

6250.00

Transaction ID : SB17.4118

☐ 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).....▶

2500.00

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. Mendoza, Callista, , ,

Mailing Address 148 Purple Sandpiper Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2026

City
LeanderState
TXZip Code
78641

FEC Identification Number

C

Purpose of Disbursement
Reimbursement, see memo items

001

Amount of Each Disbursement this Period

323.68

Transaction ID : SB17.4147

☐ 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. Mendoza, Callista, , ,

Mailing Address 148 Purple Sandpiper Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2026

City
LeanderState
TXZip Code
78641

FEC Identification Number

C

Purpose of Disbursement
mileage

002

Amount of Each Disbursement this Period

61.60

Transaction ID : SB17.4147.0

☒ 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. Mendoza, Callista, , ,

Mailing Address 148 Purple Sandpiper Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2026

City
LeanderState
TXZip Code
78641

FEC Identification Number

C

Purpose of Disbursement
mileage

002

Amount of Each Disbursement this Period

55.00

Transaction ID : SB17.4147.1

☒ 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).....▶

323.68

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

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

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. Mendoza, Callista, , ,

Mailing Address 148 Purple Sandpiper Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2026

City
LeanderState
TXZip Code
78641

FEC Identification Number

C

Purpose of Disbursement
mileage

002

Amount of Each Disbursement this Period

44.80

Transaction ID : SB17.4147.2

☒ 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. Mendoza, Callista, , ,

Mailing Address 148 Purple Sandpiper Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2026

City
LeanderState
TXZip Code
78641

FEC Identification Number

C

Purpose of Disbursement
mileage

002

Amount of Each Disbursement this Period

44.10

Transaction ID : SB17.4147.3

☒ 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. Mendoza, Callista, , ,

Mailing Address 148 Purple Sandpiper Ln

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2026

City
LeanderState
TXZip Code
78641

FEC Identification Number

C

Purpose of Disbursement
mileage

002

Amount of Each Disbursement this Period

49.00

Transaction ID : SB17.4147.4

☒ 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).....▶

0.00

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

18866.15

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. King, Kara, , ,

Mailing Address PO Box 30844

City
BethesdaState
MDZip Code
20824Purpose of Disbursement
Loan Repayment

009

Candidate Name

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 10

Date of Disbursement

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

FEC Identification Number

C H6TX10247

Amount of Each Disbursement this Period

100000.00

Transaction ID : SB19A.4181

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

100000.00

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

100000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. Babbitt, Andrew, , ,

Mailing Address 317 Charlie Joseph Drive

Date of Disbursement

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

City
Van AlstyneState
TXZip Code
75495

FEC Identification Number

C

Purpose of Disbursement
Refund of Contribution

010

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB20A.4165

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. King, Ben, , ,

Mailing Address 16005 Snowdonia Cove

Date of Disbursement

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

City
Bee CaveState
TXZip Code
78738

FEC Identification Number

C

Purpose of Disbursement
Refund of Contribution

010

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB20A.4140

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary	☒ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. King, Ben, , ,

Mailing Address 16005 Snowdonia Cove

Date of Disbursement

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

City
Bee CaveState
TXZip Code
78738

FEC Identification Number

C

Purpose of Disbursement
Refund of Contribution

010

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB20A.4183

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

8500.00

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

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

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. King, Kara, , ,

Mailing Address PO Box 30844

City
BethesdaState
MDZip Code
20824Purpose of Disbursement
Refund of Contribution

010

Candidate Name

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX

District: 10

Date of Disbursement

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

FEC Identification Number

C H6TX10247

Amount of Each Disbursement this Period

8652.92

Transaction ID : SB20A.4144

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Mafrige, David, , ,Mailing Address 1250 Wood Branch Park Dr
Suite 100City
South OrangeState
NJZip Code
07079Purpose of Disbursement
Refund of Contribution

010

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	1	/	2	8	/	2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB20A.4136

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mafrige, David, , ,Mailing Address 1250 Wood Branch Park Dr
Suite 100City
South OrangeState
NJZip Code
07079Purpose of Disbursement
Refund of Contribution

010

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

Runoff

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB20A.4137

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

15652.92

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. Miller, Catherine, , ,

Mailing Address 2905 Gilbert St

City
AustinState
TXZip Code
78703Purpose of Disbursement
Refund of Contribution

010

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	1		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : SB20A.4142

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Neely, L, Charles, Mrs., Jr.

Mailing Address 11 Inverness Blvd

City
San AntonioState
TXZip Code
78230Purpose of Disbursement
Refund of Contribution

010

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	1		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB20A.4133

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Neely, L, Charles, Mrs., Jr.

Mailing Address 11 Inverness Blvd

City
San AntonioState
TXZip Code
78230Purpose of Disbursement
Refund of Contribution

010

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☐	Primary	☐	General
☒	Other (specify) ▼		

State:

District:

Runoff

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB20A.4134

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

7900.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☒ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Kara King for Congress

Full Name (Last, First, Middle Initial)

A. Overstreet, Adrian, , ,

Mailing Address 5305 Arbutus Cove

City
AustinState
TXZip Code
78746Purpose of Disbursement
Refund of Contribution

010

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	1		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

3500.00

Transaction ID : SB20A.4167

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ward, Gerry, , ,

Mailing Address 318 Duffy Lane

City
LakewayState
TXZip Code
78738Purpose of Disbursement
Refund of Contribution

010

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	3		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : SB20A.4193

☐ Memo Item

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	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

3750.00

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

35802.92

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

PAGE 18 OF 18

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4110

Kara King for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

King, Kara, , ,

Mailing Address

PO Box 30844

City

Bethesda

State

MD

ZIP Code

20824

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

100000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 18 / 2025M M / D D / Y Y Y Y
ON DEMAND

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).....▶

0.00

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

0.00

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