

**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

SHERI BIGGS FOR CONGRESS

ADDRESS (number and street)

PO BOX 2685



Check if different than previously reported. (ACC)

ANDERSON

SC

29622-2685

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00866426

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

SC

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
04 / 01 / 2025

through

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer DATWYLER, THOMAS, , ,

Signature of Treasurer

DATWYLER, THOMAS, , ,

Date

M M / D D / Y Y Y Y  
07 / 15 / 2025

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**SHERI BIGGS FOR CONGRESS**

Report Covering the Period:

From:

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

To:

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

	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)) ....	73760.98	147294.84
(b) Total Contribution Refunds (from Line 20(d)) .....	1.73	3701.73
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	73759.25	143593.11
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	69641.46	168636.77
(b) Total Offsets to Operating Expenditures (from Line 14) .....	4855.65	5829.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	64785.81	162807.15
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	140112.07	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	395000.00	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**SHERI BIGGS FOR CONGRESS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
04 / 01 / 2025

To:

M M / D D / Y Y Y Y  
06 / 30 / 2025**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than  
Political Committees****(i) Itemized (use Schedule A).....**

26000.00

30291.02

**(ii) Unitemized .....**

535.48

778.32

**(iii) TOTAL of contributions  
from individuals .....**

26535.48

31069.34

**(b) Political Party Committees.....**

0.00

0.00

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

47225.50

116225.50

**(d) The Candidate .....**

0.00

0.00

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

73760.98

147294.84

**12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....**

20795.47

20795.47

**13. LOANS:****(a) Made or Guaranteed by the  
Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

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

0.00

0.00

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

4855.65

5829.62

**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).....**

99412.10

173919.93

# **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.....	69641.46	168636.77
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 .....	1.73	201.73
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	3500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1.73	3701.73
21. OTHER DISBURSEMENTS .....	280.00	780.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	69923.19	173118.50

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	110623.16
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	99412.10
25. SUBTOTAL (add Line 23 and Line 24).....	210035.26
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	69923.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	140112.07

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

PAGE 5 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

AGERTON III, GF, , ,

**A.** Mailing Address 133 BLUE WATER TRLCity  
SALEMState  
SCZip Code  
29676FEC 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 ▼

3000.00

Date of Receipt

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

Transaction ID : A3C044687EEF14451895

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BUTLER, SUSAN, , ,

**B.** Mailing Address 108 HARVARD STCity  
ALEXANDRIAState  
VAZip Code  
22314-2713FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CR FEDERALOccupation  
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  
06 24 2025

Transaction ID : ABFD951F0795747B7848

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CORCORAN, JESSICA, , ,

**C.** Mailing Address 7746 STILL LAKES DRCity  
ODESSAState  
FLZip Code  
33556-2260FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CORCORAN PARTNERSOccupation  
GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A59FACF8EFB9745B1808

Amount of Each Receipt this Period

3500.00

☐ Memo Item

7000.00

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

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

PAGE 6 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

DENNY, TONY, , ,

**A.**

Mailing Address 3328 DEVEREAUX RD

City

COLUMBIA

State

SC

Zip Code

29205

FEC 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
0	5		0	6		2	0	2	5

Transaction ID : A930BDBDD0D3A4E2DB37

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HERSON, MICHAEL, , ,

**B.**

Mailing Address 8709 BURNING

City

BETHESDA

State

MD

Zip Code

20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN DEFENSE INTERNATIONALOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : A2C487689F2A9423D8F2

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6014.34

Date of Receipt

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

Transaction ID : A0F2D61647DEC424AB8E

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

750.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

HILLIARD III, HEYWARD, , ,

**A.**

Mailing Address 4016 BRACKENBERRY DRIVE

City

ANDERSON

State

SC

Zip Code

29621

FEC 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 ▼

3000.00

Date of Receipt

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

Transaction ID : ACC3FAB41D4AC46BA97C

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HIPP, VAN, D., , JR.

**B.**

Mailing Address 809 N QUAKER LN

City

ALEXANDRIA

State

VA

Zip Code

22302-3416

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN DEFENSE INTERNATIONALOccupation  
CHAIRMAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AE5448E4489C44AEB81C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KING, ANDREW, , ,

**C.**

Mailing Address 11 E LENOX ST

City

CHEVY CHASE

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEALE CREEK, LLCOccupation  
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A4B9CB81E8A354738BD0

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4250.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**Full Name (Last, First, Middle Initial)  
WINRED**A.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6014.34

Date of Receipt

M M / D D / Y Y Y Y Y  
06 10 2025

Transaction ID : ABBFFD6AC05FC41CB8D8

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.** Full Name (Last, First, Middle Initial)  
LEHMAN, ROBERT, , ,

Mailing Address 2108 WINDSOR RD

City  
ALEXANDRIAState  
VAZip Code  
22307-1016FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

WILMERHALE

SENIOR PUBLIC POLICY ADVISOR

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  
06 24 2025

Transaction ID : AD5687BE011824761BBC

Amount of Each Receipt this Period

500.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)  
LOTT, TRENT, , ,

Mailing Address 74 CR 160

City  
OXFORDState  
MSZip Code  
38655FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

CROSSROADS STRATEGIES

PRINCIPAL DIRECTOR

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  
06 10 2025

Transaction ID : A9E2F006F78584440A4A

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

1000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
WINRED

**A.** Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6014.34

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 10 2025

Transaction ID : A409971B36EA1443B87E

Amount of Each Receipt this Period

500.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)  
MASSEY, EDWARD, , ,

**B.** Mailing Address 4 MOULTRIE STREET

City  
GREENVILLE

State  
SC

Zip Code  
29605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : AD0940AF27E124F14894

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)  
MCBRIDE, MICHAEL, , ,

**C.** Mailing Address PO BOX 9459

City  
GREENVILLE

State  
SC

Zip Code  
29604

FEC 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 ▼

3000.00

Date of Receipt

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

Transaction ID : ADE82A61CAD1E42388EE

Amount of Each Receipt this Period

3000.00

☐ Memo Item

6000.00

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

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

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

PAGE 10 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

MICHEL, KYLE, , ,

**A.**

Mailing Address 2404 MONROE ST.

City

COLUMBIA

State

SC

Zip Code

29205

FEC 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
05		06		2025

Transaction ID : A33AABED60C014895B87

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MILLER, H. DAN, , ,

**B.**

Mailing Address 5648 SHADY RIVER DR

City

HOUSTON

State

TX

Zip Code

77056

FEC 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 ▼

2000.00

Date of Receipt

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

Transaction ID : A7EDB1AFDBB7A4ADF87A

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TODD, J. RICHARDS, , ,

**C.**

Mailing Address 2424 HEYWARD ST

City

COLUMBIA

State

SC

Zip Code

29205

FEC 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
05		06		2025

Transaction ID : A42CD13AB351D47D291A

Amount of Each Receipt this Period

500.00

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WALKER, TODD, , ,

**A.**

Mailing Address 7200 ELIZABETH DR

City

MC LEAN

State

VA

Zip Code

22101-2627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALTRIA CLIENT SERVICES

Occupation

SENIOR VICE PRESIDENT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A7DE988747DFC4F86B05

Amount of Each Receipt this Period

500.00



Memo Item

Full Name (Last, First, Middle Initial)

WILLIAMS, ELIZABETH, , ,

**B.**

Mailing Address 2832 S. ABINGDON STREET, B2

City

ARLINGTON

State

VA

Zip Code

22206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILLIAMS COMPANY

Occupation

CONSULTANT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AB9CD0850D1E449B8AF3

Amount of Each Receipt this Period

500.00



Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

6014.34

Date of Receipt

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

Transaction ID : A030F3984B0724EA58A3

Amount of Each Receipt this Period

500.00



Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

1000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

WINTER, JUSTIN, , ,

**A.**

Mailing Address 366 RHYMES LN

City  
PICKENSState  
SCZip Code  
29671-8599FEC 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 ▼

3000.00

Date of Receipt

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

Transaction ID : A40D24EB9D34A4B998B7

Amount of Each Receipt this Period

3000.00

☐ 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)..... ▶

3000.00

26000.00

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**Full Name (Last, First, Middle Initial)  
150PAC.ORG**A.** Mailing Address PO BOX 15727City  
CHEVY CHASEState  
MDZip Code  
20825-5727FEC ID number of contributing  
federal political committee.**C** C00614552

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A7FFE061836A64334968

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
**AMERICAN ACADEMY OF PHYSICIAN ASSOCIATES PAC (PA PAC)****B.** Mailing Address 2318 MILL RD  
STE 1300City  
ALEXANDRIAState  
VAZip Code  
22314-6868FEC ID number of contributing  
federal political committee.**C** C00122499

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A2E74FCE4420944AD961

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NURSE PRACTITIONERS PAC****C.** Mailing Address PO BOX 12846City  
AUSTINState  
TXZip Code  
78711-2846FEC ID number of contributing  
federal political committee.**C** C00358903

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8500.00

Date of Receipt

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

Transaction ID : ADED779636B234FD289B

Amount of Each Receipt this Period

3500.00

☐ Memo Item

PRIMARY DEBT

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

5500.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN HOSPITAL ASSOCIATION PAC****A.**

Mailing Address 800 TENTH STREET, NW

TWO CITYCENTER, SUITE 400

City

WASHINGTON

State

DC

Zip Code

20001-5188

FEC ID number of contributing  
federal political committee.**C** C00106146

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

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

Transaction ID : A24F3859ABCCB4467ACE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY PAC (PT-PAC)****B.**

Mailing Address 3030 POTOMAC AVE

STE 100

City

ALEXANDRIA

State

VA

Zip Code

22305-3085

FEC ID number of contributing  
federal political committee.**C** C00012880

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 30 2025

Transaction ID : A75DF937197BB4C3A862

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ASSOCIATED BUILDERS AND CONTRACTORS, INC POLITICAL ACTION COMMITTEE****C.**

Mailing Address 440 1ST ST NW

STE 200

City

WASHINGTON

State

DC

Zip Code

20001-2376

FEC ID number of contributing  
federal political committee.**C** C00010421

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 26 2025

Transaction ID : A0619F35DDF024C658D2

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CSX CORPORATION GOOD GOVERNMENT FUND****A.**Mailing Address 1275 PENNSYLVANIA AVE NW  
STE 601City  
WASHINGTONState  
DCZip Code  
20004-2444FEC ID number of contributing  
federal political committee.**C** C00163832

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A67C1CA8ED77C4218B9B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**DUKE ENERGY CORPORATION PAC****B.**Mailing Address 1301 PENNSYLVANIA AVE NW  
STE 200City  
WASHINGTONState  
DCZip Code  
20004-1740FEC ID number of contributing  
federal political committee.**C** C00083535

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 10 2025

Transaction ID : A52430293269F41E096A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ELECTING MAJORITY MAKING EFFECTIVE REPUBLICANS PAC****C.**

Mailing Address PO BOX 183

City  
ANOKAState  
MNZip Code  
55303-0183FEC ID number of contributing  
federal political committee.**C** C00592089

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A22894B7EC7044B6197D

Amount of Each Receipt this Period

5000.00

☐ Memo Item

7000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**EMMER FOR CONGRESS****A.**

Mailing Address PO BOX 279

City

ELK RIVER

State

MN

Zip Code

55330-0279

FEC ID number of contributing  
federal political committee.**C** C00545749

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A3C5BC78A44B4428A8DC

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**HEALTH & FITNESS ASSOCIATION PAC FITPAC**Mailing Address 70 FARGO ST  
STE 207

City

BOSTON

State

MA

Zip Code

02210-2138

FEC ID number of contributing  
federal political committee.**C** C00335257

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 10 2025

Transaction ID : A621C38709100477DA33

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**HONEYWELL INTERNATIONAL PAC**Mailing Address 101 CONSTITUTION AVE NW  
STE 500

City

WASHINGTON

State

DC

Zip Code

20001-2133

FEC ID number of contributing  
federal political committee.**C** C00096156

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A25D45E2975B343E0939

Amount of Each Receipt this Period

2000.00

☐ Memo Item

5000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**HONEYWELL INTERNATIONAL PAC****A.**Mailing Address 101 CONSTITUTION AVE NW  
STE 500City  
WASHINGTONState  
DCZip Code  
20001-2133FEC ID number of contributing  
federal political committee.**C** C00096156

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : A4E4BD2FA0FA945819F0

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**KOCH, INC. PAC (KOCHPAC)****B.**

Mailing Address 4111 E 37TH ST N

City  
WICHITAState  
KSZip Code  
67220-3203FEC ID number of contributing  
federal political committee.**C** C00236489

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		10		2025

Transaction ID : A39C6D8058BED4507927

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC****C.**Mailing Address 2121 CRYSTAL DR  
STE 100City  
ARLINGTONState  
VAZip Code  
22202-3706FEC ID number of contributing  
federal political committee.**C** C00303024

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		30		2025

Transaction ID : AFA4CFEA0D99E409F919

Amount of Each Receipt this Period

1000.00

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

3500.00

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. SOUTHERN MISSOURIAN IN THE HOUSE PAC**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844FEC ID number of contributing  
federal political committee.**C** C00563726

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AA5CAF7AB00514CCD979

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC**

Mailing Address 1325 MASSACHUSETTS AVE NW

City  
WASHINGTONState  
DCZip Code  
20005-4108FEC ID number of contributing  
federal political committee.**C** C00238725

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A5BAB62D980B346AAA18

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF FARM SERVICE AGENCY COUNTY OFFICE EMPLOYEES INC PPC AKA NASCOE PAC**Mailing Address 1156 15TH ST NW  
STE 329City  
WASHINGTONState  
DCZip Code  
20005-1714FEC ID number of contributing  
federal political committee.**C** C00413567

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ABCBDEF33C414BF4BD6

Amount of Each Receipt this Period

1000.00

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

7000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL HEALTH CORPORATION PAC****A.**

Mailing Address P.O. BOX 1398

City  
MURFREESBOROState  
TNZip Code  
37133-1398FEC ID number of contributing  
federal political committee.**C** C00153445

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A49FA424D39ED47BFB49

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**NATIONAL HEALTH CORPORATION PAC**

Mailing Address P.O. BOX 1398

City  
MURFREESBOROState  
TNZip Code  
37133-1398FEC ID number of contributing  
federal political committee.**C** C00153445

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID : AE60B2D53710D4B23985

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**RAPTOR PAC**

Mailing Address PO BOX 4864

City  
MIDLANDState  
TXZip Code  
79704-4864FEC ID number of contributing  
federal political committee.**C** C00749481

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A00DC644CC159482EAA1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

4000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SAMSUNG ELECTRONICS AMERICA INC PAC**Mailing Address 1200 NEW HAMPSHIRE AVE NW  
STE 650City  
WASHINGTONState  
DCZip Code  
20036-6826FEC ID number of contributing  
federal political committee.**C** C00590315

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2025

Transaction ID : A005016919DB24FC3B2B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC**

Mailing Address 824 S MILLEDGE AVE, STE 101

City  
ATHENSState  
GAZip Code  
30606FEC ID number of contributing  
federal political committee.**C** C00570226

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		10		2025

Transaction ID : A9A20C1983FA74B2BAFD

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**THE KRAFT HEINZ COMPANY PAC (KRAFTHEINZPAC)**Mailing Address 401 9TH ST NW  
STE 810City  
WASHINGTONState  
DCZip Code  
20004-2189FEC ID number of contributing  
federal political committee.**C** C00077701

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A4CA258CBB2AE4BDBB68

Amount of Each Receipt this Period

1000.00

☐ Memo Item

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THE WILLIAMS COMPANIES, INC. PAC**

**A.**

Mailing Address ONE WILLIAMS CENTER 47TH FLOOR

City  
TULSA

State  
OK

Zip Code  
74172-0140

FEC ID number of contributing  
federal political committee.

**C** C00040394

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A8CBEDCC9E44547E3A2C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**VALUE IN ELECTING WOMEN PAC**

**B.**

Mailing Address 228 S WASHINGTON ST  
STE 115

City  
ALEXANDRIA

State  
VA

Zip Code  
22314-5404

FEC ID number of contributing  
federal political committee.

**C** C00327189

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AC4DE282B7B8E4C2BA06

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**VAN SCOYOC ASSOCIATES, INC. PAC**

**C.**

Mailing Address 800 MAINE AVE SW  
STE 800

City  
WASHINGTON

State  
DC

Zip Code  
20024-2806

FEC ID number of contributing  
federal political committee.

**C** C00369058

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 07 2025

Transaction ID : A95FE6E64541048F8937

Amount of Each Receipt this Period

225.50

☐ Memo Item

IN-KIND:CATERING

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

6225.50

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

47225.50

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

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

GOP WINNING WOMEN 2026

**A.**Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314-5404FEC ID number of contributing  
federal political committee.**C** C00899633

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7607.77

Date of Receipt

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

Transaction ID : A99FF82BC34DC4E1B8DD

Amount of Each Receipt this Period

3328.40

☐ Memo Item

TRANSFER FROM AUTHORIZED COMMITTEE

**B.**

Full Name (Last, First, Middle Initial)

GOP WINNING WOMEN 2026

Mailing Address 228 S WASHINGTON ST  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314-5404FEC ID number of contributing  
federal political committee.**C** C00899633

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7607.77

Date of Receipt

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

Transaction ID : A2EC23669CFB84D77862

Amount of Each Receipt this Period

4279.37

☐ Memo Item

TRANSFER FROM AUTHORIZED COMMITTEE

**C.**

Full Name (Last, First, Middle Initial)

WFW ACTION FUND, INC.

Mailing Address 700 12TH ST NW  
STE 700City  
WASHINGTONState  
DCZip Code  
20005-4052FEC ID number of contributing  
federal political committee.**C** C00698936

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A26D2DA57DC7F43F4BA9

Amount of Each Receipt this Period

1000.00

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

7607.77

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

PAGE 23 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

STERN, ELIZABETH, , ,

**A.**

Mailing Address 20 DORIS DR

City

SCARSDALE

State

NY

Zip Code

10583-2712

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 ▼

3500.00

Date of Receipt

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

Transaction ID : ABD8A5145F5B14DB1B00

Amount of Each Receipt this Period

3500.00



Memo Item

**B.**

Full Name (Last, First, Middle Initial)

SHERI BIGGS VICTORY FUND

Mailing Address 502 6TH STREET

City

HUDSON

State

WI

Zip Code

54016

FEC ID number of contributing  
federal political committee.

C

C00884460

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

13187.70

Date of Receipt

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

Transaction ID : A026DC8E0E3C8412880C

Amount of Each Receipt this Period

104.16



Memo Item

TRANSFER FROM AUTHORIZED COMMITTEE

**C.**

Full Name (Last, First, Middle Initial)

SMYTH, RICK, , ,

Mailing Address 131 SPANISH WLS

City

ANDERSON

State

SC

Zip Code

29621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WEALTH MANAGEMENT

Occupation

AIONIOS CAPTIAL PRNERS

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3615.70

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 20 / 2025D D / Y Y Y Y Y  
20 / 2025Y Y Y Y Y  
2025

Transaction ID : A4E9EB23A11924C71922

Amount of Each Receipt this Period

115.70



Memo Item

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

104.16

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

PAGE 24 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SHERI BIGGS VICTORY FUND****A.**

Mailing Address 502 6TH STREET

City  
HUDSONState  
WIZip Code  
54016FEC ID number of contributing  
federal political committee.**C** C00884460

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13187.70

Date of Receipt

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

Transaction ID : A042E7EB14D7B4D45AB2

Amount of Each Receipt this Period

13083.54

☐ Memo Item

TRANSFER FROM AUTHORIZED COMMITTEE

**B.**

Full Name (Last, First, Middle Initial)

**TOWNSON, CHRISTOPHER, , ,**

Mailing Address 624 FAIRWAY LAKES RD

City  
GREENWOODState  
SCZip Code  
29649FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

CEO

WEST CAROLINA

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 30 2025

Transaction ID : A093F7E74BBB241B5B4F

Amount of Each Receipt this Period

500.00

☒ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**CARR, CHALMERS, , ,**

Mailing Address 722 OLD PLANK RD

City  
RIDGE SPRINGState  
SCZip Code  
29129FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

CEO

TITAN FARMS

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  
05 06 2025

Transaction ID : A893ECBFD59C54E93921

Amount of Each Receipt this Period

1000.00

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

13083.54

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

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

PAGE 25 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

ADAMS, DAN, , ,

**A.**

Mailing Address 84 VILLA RD

City

GREENVILLE

State

SC

Zip Code

29615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EXECUTIVE

Occupation

THE CAPITAL CORPORATION

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

Transaction ID : A8068329DEBA149DEAB7

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

TAYLOR, STEPHEN, , ,

**B.**

Mailing Address 111 PINEVIEW ST

City

ABBEVILLE

State

SC

Zip Code

29620

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMMUNITY GOVERNMENT AFFAIRS

Occupation

WEST CAROLINA

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A0FC2D7D6897B44F3867

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MCCOWAN, KEVIN, , ,

**C.**

Mailing Address 208 JAMES ST

City

ANDERSON

State

SC

Zip Code

29625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ADMINISTRATOR

Occupation

LINLEY PARK POST ACUTE

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA2A45E95F20E4A4B95A

Amount of Each Receipt this Period

1000.00

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

0.00

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

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

PAGE 26 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

KUMAR, SANJEEV, , ,

**A.** Mailing Address 3000 BAREFOOT TRLCity  
ANDERSONState  
SCZip Code  
29621FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PHYSICIANOccupation  
SELF

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  
04 30 2025

Transaction ID : A1D65CFD15B3F4D18A79

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

VANJANI, RAJ, , ,

**B.** Mailing Address 6412 QUEENS BOROUGH AVENUE APT 307City  
ORLANDOState  
FLZip Code  
32835FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1033.06

Date of Receipt

M M / D D / Y Y Y Y Y  
04 23 2025

Transaction ID : A94D9CEFC924A4DB99FB

Amount of Each Receipt this Period

1033.06

☒ Memo Item

Full Name (Last, First, Middle Initial)

THOMPSON, GREG, , ,

**C.** Mailing Address 1820 STADIUM RDCity  
SUMTERState  
SCZip Code  
29154FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THOMPSON CONSTRUCTION GROPIOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ACFDBFE4853A94CD186A

Amount of Each Receipt this Period

1000.00

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

0.00

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

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

PAGE 27 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

SIMPSON, ALLEN, , ,

**A.**

Mailing Address 553 BRIARWOOD LN

City

LANCASTER

State

SC

Zip Code

29720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MANAGING PARTNEROccupation  
DUE SOUTH ADVOCACY

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  
05 06 2025

Transaction ID : A523D59F13F5B47AFB19

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

SMYTH, RICK, , ,

**B.**

Mailing Address 131 SPANISH WLS

City

ANDERSON

State

SC

Zip Code

29621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WEALTH MANAGEMENTOccupation  
AIONIOS CAPTIAL PRNTERS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3615.70

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 20 2025

Transaction ID : A0596B075C90D490DBB9

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

AGOSTINI, LINDSAY, , ,

**C.**

Mailing Address 120 COOPERS NURSERY RD

City

ELGIN

State

SC

Zip Code

29045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CONSULTANTOccupation  
AGOSTINI ASSOCIATES

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A7542FBD5F6F84B5EAA6

Amount of Each Receipt this Period

500.00

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

0.00

20795.47

# **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 28 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SAME DAY PROCESSING**

**A.**

Mailing Address 502 6TH ST

City  
HUDSON

State  
WI

Zip Code  
54016-1783

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4855.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 03 2025

Transaction ID : A0CA4797A765A435EAA0

Amount of Each Receipt this Period

4855.65

☐ Memo Item  
CAGING REFUND

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)..... ▶

4855.65

4855.65

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

PAGE 29 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address 200 VESEY STREET

City  
NEW YORKState  
NYZip Code  
10285-1000Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

470.00

Transaction ID : BB6062A28A71B477F874

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ARISTOTLE INTERNATIONAL INC.**

Mailing Address PO BOX 716045

City  
PHILADELPHIAState  
PAZip Code  
19171-6045Purpose of Disbursement  
DATABASE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2400.00

Transaction ID : B17AD4880807C482C965

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AXCAPITAL, LLC**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2055.00

Transaction ID : BDBFFD17168E24318A26

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

4925.00

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

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

PAGE 30 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AXCAPITAL, LLC**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2055.00

Transaction ID : B5800C8B48D5743EDBB4

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AXCAPITAL, LLC**Mailing Address 800 W 47TH ST  
STE 200City  
KANSAS CITYState  
MOZip Code  
64112-1244Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2055.00

Transaction ID : B709037D9849940DCB2D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

332.10

Transaction ID : BE1E30886865C4180A02

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

4442.10

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

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

PAGE 31 OF 46

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

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NAME OF COMMITTEE (In Full)

SHERI BIGGS FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20003-1801

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

906.19

Transaction ID : B7B042E2645AA4C1C958

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	2	5

City  
WASHINGTONState  
DCZip Code  
20003-1801

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

150.00

Transaction ID : B713B0D55971E4BC7BE3

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20003-1801

FEC Identification Number

C

Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

216.68

Transaction ID : BB1864C05607F4FA4A8A

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1272.87

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

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

PAGE 32 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

192.71

Transaction ID : B4262EAE3E5724D2F8FA

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

163.75

Transaction ID : B2973BD1B8DF046B590B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1801Purpose of Disbursement  
FOOD AND BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

210.40

Transaction ID : BDB9502A6E34E46D4A95

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

566.86

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

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

PAGE 33 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

Date of Disbursement

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

City  
WASHINGTONState  
DCZip Code  
20003-1801

FEC Identification Number

**C**Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

213.83

Transaction ID : B19C9C99ED5744752AF9

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06	/	26	/	2025

City  
WASHINGTONState  
DCZip Code  
20003-1801

FEC Identification Number

**C**Purpose of Disbursement  
FOOD AND BEVERAGE

001

Amount of Each Disbursement this Period

182.83

Transaction ID : B9863CE2AA9BD4262B87

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. ELEVEN17 CONSULTING LLC**

Mailing Address 202 HUMMINGBIRD LN

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04	/	29	/	2025

City  
STARKVILLEState  
MSZip Code  
39759-4162

FEC Identification Number

**C**Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

2867.43

Transaction ID : BE01B6C73084E465B9F3

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

3264.09

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

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

PAGE 34 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELEVEN17 CONSULTING LLC**

Mailing Address 202 HUMMINGBIRD LN

City  
STARKVILLEState  
MSZip Code  
39759-4162Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4763.99

Transaction ID : B4FF61DCF5B9F45F7B62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELEVEN17 CONSULTING LLC**

Mailing Address 202 HUMMINGBIRD LN

City  
STARKVILLEState  
MSZip Code  
39759-4162Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

3761.50

Transaction ID : BF86E02683B8B475CAF8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

City  
HUDSONState  
WIZip Code  
54016-1783Purpose of Disbursement  
CAGING

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4855.65

Transaction ID : B4050E3F61D6D46B7A0E

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

13381.14

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

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

PAGE 35 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-1783

FEC Identification Number

**C**Purpose of Disbursement  
CAGING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

24.50

Transaction ID : B9CE84B68C7584537B2F

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-1783

FEC Identification Number

**C**Purpose of Disbursement  
CAGING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

60.00

Transaction ID : B1BB9F4277EAE43CFBCC

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-1783

FEC Identification Number

**C**Purpose of Disbursement  
CAGING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

21.00

Transaction ID : B9576252691EF4D3D845

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

105.50

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

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

PAGE 36 OF 46

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

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NAME OF COMMITTEE (In Full)

SHERI BIGGS FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. SAME DAY PROCESSING**

Mailing Address 502 6TH ST

Date of Disbursement

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

City  
HUDSONState  
WIZip Code  
54016-1783

FEC Identification Number

C

Purpose of Disbursement  
CAGING

001

Amount of Each Disbursement this Period

24.50

Transaction ID : B7165ECCD82224F7BB40

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. THE ANDERSON SPORTS AND ENTERTAINMENT CENTER**

Mailing Address PO BOX 199

Date of Disbursement

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

City  
ANDERSONState  
SCZip Code  
29622-0199

FEC Identification Number

C

Purpose of Disbursement  
EVENT SITE RENTAL

001

Amount of Each Disbursement this Period

3700.00

Transaction ID : B3249971CD3894741BEE

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. THE TOWNSEND GROUP**Mailing Address 2308 MT VERNON AVE  
STE 707

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		22		2025

City  
ALEXANDRIAState  
VAZip Code  
22301-1328

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Amount of Each Disbursement this Period

7832.13

Transaction ID : BA69A9F0852B14D17B43

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

11556.63

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

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

PAGE 37 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. TRUESAFE STORAGE**

Mailing Address 3541 S CHESTATEE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City  
DAHLONEGAState  
GAZip Code  
30533-7153

FEC Identification Number

**C**Purpose of Disbursement  
STORAGE UNIT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

141.00

Transaction ID : B6984350DE3F24A2686F

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. TRUESAFE STORAGE**

Mailing Address 3541 S CHESTATEE

Date of Disbursement

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

City  
DAHLONEGAState  
GAZip Code  
30533-7153

FEC Identification Number

**C**Purpose of Disbursement  
STORAGE UNIT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

141.00

Transaction ID : B47AD320A738B41F0960

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. TRUESAFE STORAGE**

Mailing Address 3541 S CHESTATEE

Date of Disbursement

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

City  
DAHLONEGAState  
GAZip Code  
30533-7153

FEC Identification Number

**C**Purpose of Disbursement  
STORAGE UNIT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

141.00

Transaction ID : B646DA99CB5A0449CB3E

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

423.00

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

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

PAGE 38 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. UPT STRATEGIES**

Mailing Address PO BOX 31403

Date of Disbursement

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

City  
CHARLESTONState  
SCZip Code  
29417-1403

FEC Identification Number

**C**Purpose of Disbursement  
CAMPAIGN CONSULTING AND MEDIA PLACEMENT

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

16021.18

Transaction ID : B6A884D75B01643B8817

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B. UPT STRATEGIES**

Mailing Address PO BOX 31403

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

City  
CHARLESTONState  
SCZip Code  
29417-1403

FEC Identification Number

**C**Purpose of Disbursement  
CAMPAIGN CONSULTING AND MEDIA PLACEMENT

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

12654.04

Transaction ID : BC3BD75332D9F439D823

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**C. VAN SCOYOC ASSOCIATES, INC. PAC**Mailing Address 800 MAINE AVE SW  
STE 800

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2025

City  
WASHINGTONState  
DCZip Code  
20024-2806

FEC Identification Number

**C**Purpose of Disbursement  
IN-KIND:CATERING

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

225.50

Transaction ID : B95FE6E64541048F8937

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

28900.72

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

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

PAGE 39 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

80.52

Transaction ID : B0C9B0A91833F4520852

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES, LLC**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

2.14

Transaction ID : B4235F19EED8A409EBC5

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES, LLC**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
CREDIT CARD FEES

001

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.62

Transaction ID : BC763D0D80ACD4A08B0A

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

84.28

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

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

PAGE 40 OF 46

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

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NAME OF COMMITTEE (In Full)

SHERI BIGGS FOR CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES, LLC**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

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

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
CREDIT CARD FEES

001

Amount of Each Disbursement this Period

0.99

Transaction ID : B0822E9C6467B42ABA14

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

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

0.99

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

68923.18

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

PAGE 41 OF 46

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

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NAME OF COMMITTEE (In Full)

**SHERI BIGGS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ROTARY CLUB OF GREENWOOD**

Mailing Address PO BOX 50463

Date of Disbursement

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

City  
GREENWOODState  
SCZip Code  
29649-0025

FEC Identification Number

**C**Purpose of Disbursement  
DONATION

012

Category/  
Type

Amount of Each Disbursement this Period

280.00

Transaction ID : B6A13D26CC30A4E2BAAA

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

**C**

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

280.00

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

280.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

PAGE 42 OF 46

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 : CAB4CBCB56EBA49A4932

SHERI BIGGS FOR CONGRESS

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

Election: 2024

BIGGS, SHERI, , ,

☐ Primary☐ General☒ Other (specify) ▼

Mailing Address

PO BOX 2685

RUNOFF

City

ANDERSON

State

SC

ZIP Code

29622-2685

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
06 / 20 / 2024

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).....▶

50000.00

**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 43 OF 46

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 : C03FE55CA1CED4B0AA77

SHERI BIGGS FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

BIGGS, SHERI, , ,

Mailing Address

PO BOX 2685

City

ANDERSON

State

SC

ZIP Code

29622-2685

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
01 18 / 2024M M / D D / Y Y Y Y  
12 31 / 1969

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).....▶

100000.00

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

PAGE 44 OF 46

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

NAME OF COMMITTEE (In Full)

Transaction ID : CA44886F053464DC0B68

SHERI BIGGS FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

BIGGS, SHERI, , ,

Mailing Address

PO BOX 2685

City

ANDERSON

State

SC

ZIP Code

29622-2685

☒ Personal Funds of the Candidate

Original Amount of Loan

150000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

150000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
03 / 28 / 2024

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).....▶

150000.00

**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 45 OF 46

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 : C8084F3B73E374874A2D

SHERI BIGGS FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

BIGGS, SHERI, , ,

Mailing Address

PO BOX 2685

City

ANDERSON

State

SC

ZIP Code

29622-2685

☒ Personal Funds of the Candidate

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
05 / 24 / 2024

M M / D D / Y Y Y Y

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).....▶

30000.00

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

PAGE 46 OF 46

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

NAME OF COMMITTEE (In Full)

Transaction ID : C5A147CE632A24B92BC6

SHERI BIGGS FOR CONGRESS

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

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

BIGGS, SHERI, , ,

Mailing Address

PO BOX 2685

City

ANDERSON

State

SC

ZIP Code

29622-2685

☒ Personal Funds of the Candidate

Original Amount of Loan

65000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

65000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y  
05 07 / 2024

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).....▶

65000.00

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

395000.00

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