

**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

Friends of Justin Mcneal for US Senate

ADDRESS (number and street)

PO Box

1305

Rapid City

SD

57709

☐ Check if different
than previously
reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00924514

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

STATE ▼ DISTRICT

SD

00

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 /

05

D D /

14

Y Y Y Y /

2026

through

M M /

06

D D /

30

Y Y Y Y /

2026

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

Type or Print Name of Treasurer Amoroso, Sabina, Arora, ,

Signature of Treasurer

Amoroso, Sabina, Arora, ,

Date

M M /

07

D D /

15

Y Y Y Y /

2026

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

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Friends of Justin Mcneal for US Senate

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	3113.00	10893.13
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	3113.00	10893.13
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6945.44	10991.79
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	6945.44	10991.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1.34	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	66227.75	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Friends of Justin Mcneal for US Senate

Report Covering the Period:

From:

MM / DD / YYYY
05 / 14 / 2026

To:

MM / DD / YYYY
06 / 30 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

2550.00

9170.00

(ii) Unitemized

558.00

1692.10

(iii) TOTAL of contributions
from individuals ▶

3108.00

10862.10

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

5.00

31.03

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

3113.00

10893.13

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

100.00

(b) All Other Loans.....

0.00

0.00

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

0.00

100.00

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

0.00

0.00

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

0.00

0.00

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

3113.00

10993.13

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.....	6945.44	10991.79
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	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6945.44	10991.79

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3833.78
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3113.00
25. SUBTOTAL (add Line 23 and Line 24).....	6946.78
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6945.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1.34

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

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

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 17

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

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

NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

Full Name (Last, First, Middle Initial)

Gavic, Paul, , ,

A.

Mailing Address 12725 Nightingale St Nw

City

Coon Rapids

State

MN

Zip Code

55448

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 14 2026

Transaction ID : A-107

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Goodrich, Craig, D, ,

B.

Mailing Address 22936 Forest Road

City

Rapid City

State

SD

Zip Code

57702

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 14 2026

Transaction ID : A-143

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Harrington, John, M, , III

C.

Mailing Address 5 Sheffield West

City

Winchester

State

MA

Zip Code

01890

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 02 2026

Transaction ID : A-287

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)..... ▶

2300.00

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 6 OF 17

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

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NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

Full Name (Last, First, Middle Initial)

Larson, Karen, , ,

A. Mailing Address 710 10th Ave S

City

Clear Lake

State

SD

Zip Code

57226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 09 / 2026

Transaction ID : A-106

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmark via WinRed on 2026-05-14

Full Name (Last, First, Middle Initial)

WinRed

B. Mailing Address 4250 Fairfax Dr
Ste 600

City

Arlington

State

VA

Zip Code

22203

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

6130.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2026

Transaction ID : A-106CM

Amount of Each Receipt this Period

250.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

250.00

2550.00

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

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

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NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

Full Name (Last, First, Middle Initial)

A. Aberdeen Flying Service

Mailing Address 4430 U.S. 12

Date of Disbursement

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

City
AberdeenState
SDZip Code
57401Purpose of Disbursement
AV Fuel

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

304.43

Transaction ID : B-268

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Finn, Kaitlyn, , ,

Mailing Address 8118B Sawyer Brown Road

Date of Disbursement

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

City
NashvilleState
TNZip Code
37221Purpose of Disbursement
Deputy Camp Manager and & Design Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B-271

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Finn, Kaitlyn, , ,

Mailing Address 8118B Sawyer Brown Road

Date of Disbursement

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

City
NashvilleState
TNZip Code
37221Purpose of Disbursement
Deputy Camp Manager and & Design Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : B-272

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

3304.43

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

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

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

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NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc.

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Social Media Ads

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-145

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Meta Platforms, Inc.

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Social Media Ads

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1.54

Transaction ID : B-146

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Meta Platforms, Inc.

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Social Media Ads

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.40

Transaction ID : B-147

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

503.94

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

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

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

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NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

Full Name (Last, First, Middle Initial)

A. Meta Platforms, Inc.

Mailing Address 1 Meta Way

City
Menlo ParkState
CAZip Code
94025Purpose of Disbursement
Social Media Ads

004

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

77.59

Transaction ID : B-267

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Sagepath Strategic Group LLC

Mailing Address 32013 Salt Cedar Ct

City
LewesState
DEZip Code
19958-4578Purpose of Disbursement
Campaign Management Services

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : B-269

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical Services LLC

Mailing Address 1603 Capitol Avenue

City
CheyenneState
WYZip Code
82001Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

9.85

Transaction ID : B-133

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

3087.44

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

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

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

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NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

Full Name (Last, First, Middle Initial)

A. WinRed Technical Services LLC

Mailing Address 1603 Capitol Avenue

City
CheyenneState
WYZip Code
82001Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

39.40

Transaction ID : B-142

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technical Services LLC

Mailing Address 1603 Capitol Avenue

City
CheyenneState
WYZip Code
82001Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.78

Transaction ID : B-278

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technical Services LLC

Mailing Address 1603 Capitol Avenue

City
CheyenneState
WYZip Code
82001Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.94

Transaction ID : B-280

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

44.12

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

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

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

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NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

Full Name (Last, First, Middle Initial)

A. WinRed Technical Services LLC

Mailing Address 1603 Capitol Avenue

City
CheyenneState
WYZip Code
82001Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

0.51

Transaction ID : B-282

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

0.51

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

6940.44

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

PAGE 12 OF 17

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

NAME OF COMMITTEE (In Full)

Transaction ID : C-28

Friends of Justin Mcneal for US Senate

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Mcneal, Justin, S, ,

Mailing Address

PO Box
1305

City

Rapid City

State

SD

ZIP Code

57709

☒ Personal Funds of the Candidate

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 02 / 2026

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

As Available

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).....▶

100.00

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

100.00

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

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

PAGE 13 OF 17

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

NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

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

Finn, Kaitlyn, , ,

Nature of Debt (Purpose):

Deputy Campaign Manager & Design
Services

Mailing Address 8118B Sawyer Brown Road

City

Nashville

State

TN

Zip Code

37221

Outstanding Balance Beginning This Period

1500.00

Transaction ID : D-100

Amount Incurred This Period

0.00

Payment This Period

1500.00

Outstanding Balance at Close of This Period

0.00

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

Finn, Kaitlyn, , ,

Nature of Debt (Purpose):

Deputy Camp Manager and & Design
Services

Mailing Address 8118B Sawyer Brown Road

City

Nashville

State

TN

Zip Code

37221

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-257

Amount Incurred This Period

1500.00

Payment This Period

1500.00

Outstanding Balance at Close of This Period

0.00

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

Integrated Solutions: Political

Nature of Debt (Purpose):

Reporting and Compliance Software

Mailing Address 4142 Adams Avenue
Suite 103-550

City

San Diego

State

CA

Zip Code

92116

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-103

Amount Incurred This Period

500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

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

500.00

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

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

PAGE 14 OF 17

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

NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

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

Mcneal, Justin, S, ,

Nature of Debt (Purpose):

Advance of Personal Funds

Mailing Address PO Box
1305City
Rapid CityState
SDZip Code
57709

Outstanding Balance Beginning This Period

2308.02

Transaction ID : D-213

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2308.02

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

Mcneal, Justin, S, ,

Nature of Debt (Purpose):

Advance of Personal Funds

Mailing Address PO Box
1305City
Rapid CityState
SDZip Code
57709

Outstanding Balance Beginning This Period

5695.89

Transaction ID : D-41

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5695.89

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

Mcneal, Justin, S, ,

Nature of Debt (Purpose):

Expense Reimbursement

Mailing Address PO Box
1305City
Rapid CityState
SDZip Code
57709

Outstanding Balance Beginning This Period

15461.61

Transaction ID : D-138

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15461.61

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

23465.52

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

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

PAGE 15 OF 17

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

NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

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

Mcneal, Justin, S, ,

Nature of Debt (Purpose):

Advance of Personal Funds

Mailing Address PO Box
1305City
Rapid CityState
SDZip Code
57709

Outstanding Balance Beginning This Period

8562.23

Transaction ID : D-175

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8562.23

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

Mcneal, Justin, S, ,

Nature of Debt (Purpose):

Advance of Personal Funds

Mailing Address PO Box
1305City
Rapid CityState
SDZip Code
57709

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-166

Amount Incurred This Period

9000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9000.00

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

Mcneal, Justin, S, ,

Nature of Debt (Purpose):

Advance of Personal Funds

Mailing Address PO Box
1305City
Rapid CityState
SDZip Code
57709

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-226

Amount Incurred This Period

2600.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2600.00

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

20162.23

2) **TOTALS** This Period (last page this line number only)3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

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

PAGE 16 OF 17

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

NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

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

Sagepath Strategic Group LLC

Nature of Debt (Purpose):

Campaign Management Sevices

Mailing Address 32013 Salt Cedar Ct

City

Lewes

State

DE

Zip Code

19958-4578

Outstanding Balance Beginning This Period

10000.00

Transaction ID : D-21

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

7000.00

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

Sagepath Strategic Group LLC

Nature of Debt (Purpose):

Campaign Management Sevices

Mailing Address 32013 Salt Cedar Ct

City

Lewes

State

DE

Zip Code

19958-4578

Outstanding Balance Beginning This Period

5000.00

Transaction ID : D-101

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

Sagepath Strategic Group LLC

Nature of Debt (Purpose):

Camp Management Services

Mailing Address 32013 Salt Cedar Ct

City

Lewes

State

DE

Zip Code

19958-4578

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-258

Amount Incurred This Period

5000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

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

17000.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

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

PAGE 17 OF 17

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

NAME OF COMMITTEE (In Full)

Friends of Justin Mcneal for US Senate

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

Sagewell Compliance LLC

Nature of Debt (Purpose):

Treasury & Compliance Services

Mailing Address 32013 Salt Cedar Ct

City

Lewes

State

DE

Zip Code

19958-4578

Outstanding Balance Beginning This Period

1000.00

Transaction ID : D-24

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

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

Sagewell Compliance LLC

Nature of Debt (Purpose):

Treasury & Compliance Services

Mailing Address 32013 Salt Cedar Ct

City

Lewes

State

DE

Zip Code

19958-4578

Outstanding Balance Beginning This Period

2000.00

Transaction ID : D-102

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

Sagewell Compliance LLC

Nature of Debt (Purpose):

Treasury and Compliance Services

Mailing Address 32013 Salt Cedar Ct

City

Lewes

State

DE

Zip Code

19958-4578

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-259

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

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

5000.00

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

66127.75

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

100.00

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

66227.75