PAGE 1 / 54

**FEC** 

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

FORIVI 3X	For Other Than An A	Authorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Lisa McClain Leade	rship Fund		
ADDRESS (number and street)	824 S MILLEDGE AVE	NUE	
Check if different than previously reported. (ACC)	ATHENS		GA 30605 -
2. FEC IDENTIFICATION	NUMBER ▼	CITY ▲	STATE ▲ ZIP CODE ▲
C C00868091	3	REPORT NEW (N) O	R AMENDED (A)
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	Report Due On:	Feb 20 (M2) May 20 (M  Mar 20 (M3) Jun 20 (M  Apr 20 (M4) Jul 20 (M3)	(Non-Election Year Only)  Sep 20 (M9)  Dec 20 (M1 (Non-Election Year Only)
April 15 Quarterly Repor  X July 15 Quarterly Repor  October 15 Quarterly Repor  January 31 Year-End Repor	t (Q2)  PRE-Election Report for the		General (12G)  Special (12S)  In the State of
July 31 Mid-Yea Report (Non-ele Year Only) (MY Termination Rep (TER)	(d) 30-Day POST-Election Report for the	` '	Runoff (30R)  Special (30S)  in the State of
5. Covering Period	04 01 20		M / D D / Y Y Y Y Y 30 30 2025
I certify that I have examined Type or Print Name of Treas	Kilgore Paul	st of my knowledge and belief it is	s true, correct and complete.
Signature of Treasurer	Kilgore, Paul, , ,		Date 08 / 21 / 2025
NOTE: Submission of false, e	roneous, or incomplete inform	nation may subject the person signin	g this Report to the penalties of 52 U.S.C. § 301
Office Use			FEC FORM 3X Rev. 05/2016

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Lisa McClain Leadership Fund 04 2025 06 30 2025 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1500.38 January 1. 2025 (b) Cash on Hand at 37563.10 Beginning of Reporting Period..... 542715.00 751066.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 580278.10 752566.38 6(a) and 6(c) for Column B)..... 698653.28 526365.00 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 53913.10 53913.10 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3

Write or Type Committee Name

Lisa McClair	n Leadership	Fund
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01 04 2025 30 2025 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 503650.00 711800.00 (i) Itemized (use Schedule A)..... 1565.00 1766.00 (ii) Unitemized ..... (iii) TOTAL (add 713566.00 505215.00 Lines 11(a)(i) and (ii).................▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 37500.00 37500.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 751066.00 542715.00 Totals to Line 33, page 5) ......▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 751066.00 12, 13, 14, 15, 16, 17, and 18(c))....... 542715.00 20. Total Federal Receipts 542715.00 751066.00 (subtract Line 18(c) from Line 19) .......▶

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Operating Expenditures:  (a) Allocated Federal/Non-Federal  Activity (from Schodule H4)	Total Tills Follow	Galeridai Teat-10-Date
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		4 4
Expenditures	63702.59	71473.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	63702.59	71473.43
2. Transfers to Affiliated/Other Party	00102.00	
Committees	461162.41	625679.85
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	4 4	
(use Schedule E)	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
,	4 4	4 4
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To:     (a) Individuals/Persons Other	7 7 7	
Than Political Committees	1500.00	1500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	200	0.00
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	1500.00	1500.00
Other Disbursements (Including	45.	4 4
Non-Federal Donations)	0.00	0.00
,	4 4	4 4
<ol> <li>Federal Election Activity (52 U.S.C. § 3010103</li> <li>(a) Allocated Federal Election Activity</li> </ol>	20))	
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid	0.00	
Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	526365.00	698653.28
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	526365.00	698653.28

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page <b>5</b>			
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
33. Total Contributions (other than loans) (from Line 11(d), page 3)	542715.00	751066.00			
34. Total Contribution Refunds (from Line 28(d))	1500.00	1500.00			
<ol> <li>Net Contributions (other than loans)</li> <li>(subtract Line 34 from Line 33)</li> </ol>	541215.00	749566.00			
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	63702.59	71473.43			
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00			
88. Net Operating Expenditures (subtract Line 37 from Line 36)	63702.59	71473.43			

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) X 11a 11b 11c

54

6 OF

ITEMIZED RECEIPTS for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ABDALLAH, BELAL, , , Date of Receipt Mailing Address 145 HAMPSHIRE CT 18 2025 City Zip Code State Transaction ID: SA11A.46167 **DEARBORN** 48124-1123 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PULSE PRIMARY PLLC **PHYSICIAN** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ANGE, KERRY, , MS., Date of Receipt Mailing Address 2929 LAPEER RD. 06 2025 City State Zip Code Transaction ID: SA11A.56443 **PORT HURON** MI 48060-2558 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ARROYO, ASHLY, , , Date of Receipt Mailing Address 555 WEST BEECH STREET 2025 29 City State Zip Code Transaction ID: SA11A.58025 CA SAN DIEGO 92101-2940 Amount of Each Receipt this Period FEC ID number of contributing 30000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CLEARSPEED INC CHIEF OF STAFF CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 30000.00 Other (specify) 32000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: **PAGE** OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt ATASSI, MALAZ, , , Mailing Address 5045 CHARING CROSS RD 2025 15 City Zip Code State Transaction ID: SA11A.53706 **BLOOMFIELD HILLS** 48304-3681 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) PRIMARY MEDICINE PC **PHYSICIAN** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BASHA, ISMAEL, , , Date of Receipt Mailing Address 1447 CLUB DR 06 15 2025 City State Zip Code Transaction ID: SA11A.53705 **BLOOMFIELD HILLS** MI 48302-0705 Amount of Each Receipt this Period FEC ID number of contributing 3500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED** NONE CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BASHA, YAHYA, , , Date of Receipt Mailing Address 30701 WOODWARD AVENUE 2025 16 STE LL City State Zip Code Transaction ID: SA11A.53717 MI **ROYAL OAK** 48073-0988 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BASHA DIAGNOSTICS **PHYSICIAN** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 11500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 

FOR LINE NUMBER: **PAGE** 8 Use separate schedule(s) (check only one) X 11a 11b 11c

54

OF

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BESSETTE, MARK, , , Date of Receipt Mailing Address 4653 DESOMOD BEACH 2025 12 City Zip Code State Transaction ID: SA11A.53688 FORT GRATIOT 48059-Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LEGACY PORT HURON PAPER MANAGING DIRECTOR CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BHATT, ARYAN, , , Date of Receipt Mailing Address 1917 MARTIN LUTHER KING JR WAY 04 10 2025 City State Zip Code Transaction ID: SA11A.40580 **BERKELEY** CA 94704-1037 Amount of Each Receipt this Period FEC ID number of contributing 12000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) RESEARCH SCIENTIST REDWOOD RESEARCH CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 12000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BONES, JOHN, , , Date of Receipt Mailing Address 49961 GOLDEN LAKE DR 2025 19 City State Zip Code Transaction ID: SA11A.55084 MI UTICA 48315-3554 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) TEAM UP ACADEMY **EXECUTIVE DIRECTOR** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 12500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12

54

Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BOOMROD, AHMED, , , Date of Receipt Mailing Address 1 GOLFCREST CT 2025 30 City Zip Code State Transaction ID: SA11A.58026 **DEARBORN** 48124-1116 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **GDI SERVICES CHAIRMAN** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 7000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BRADY, BERT, , , Date of Receipt Mailing Address 8702 NOVANNA CIRCLE 06 16 2025 City State Zip Code Transaction ID: SA11A.53710 MONCLOVA OH 43542-8624 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **OWNER** REMEDI SENIOR CARE PHARMACY CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name BRANDANO, ANTHONY, , , Date of Receipt Mailing Address 7330 LAKEVIEW DR 2025 23 City State Zip Code Transaction ID: SA11A.49421 MI LEXINGTON 48450-8806 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) LAKES PILOTS ASSOCIATION SHIP PILOT CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 9500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CATENACCI, PAUL, O., MR., Date of Receipt Mailing Address 888 W. BIG BEAVER RD. 2025 STE. 600 State City Zip Code Transaction ID: SA11A.56438 **TROY** 48084-4781 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 7000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. CECAVA, ERIC, , MR., Date of Receipt Mailing Address 3822 ARLINGTON AVE. 06 2025 UNIT 71 City State Zip Code Transaction ID: SA11A.56445 **FORT GRATIOT** MI 48059-3756 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BE INFORMATION REQUESTED PER BEST EFFORTS CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CHAUDHRY, KAMRAN, , , Date of Receipt Mailing Address 5000 TOWN CTR 2025 06 16 STE # 1307 City State Zip Code Transaction ID: SA11A.53715 MI SOUTHFIELD 48075-1114 Amount of Each Receipt this Period FEC ID number of contributing C 3500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CIENA HEALTHCARE **ADMINISTRATION** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) 10750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c 14 13 15 16

Detailed Summary Page 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) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name CLYMER, JOSHUA, , , Date of Receipt Mailing Address 2169 GRANT ST 2025 13 City Zip Code State Transaction ID: SA11A.40585 **BERKELEY** CA 94703-1517 Amount of Each Receipt this Period FEC ID number of contributing 8000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) REDWOOD RESEARCH RESEARCHER CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 8000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DENHA, JEFFREY, , MR., Date of Receipt Mailing Address 5971 BURNHAM RD 05 2025 City State Zip Code Transaction ID: SA11A.49417 **BLOOMFIELD HILLS** MI 48302-4021 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **ENGINEER BRASS ALUMINUM FORGING** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DENHA, KEVIN, , , Date of Receipt Mailing Address 700 NORTH OLD WOODWARD AVENUE 2025 23 **STE 300** City State Zip Code Transaction ID: SA11A.49420 MI **BIRMINGHAM** 48009-1338 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYED **REAL ESTATE** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 10500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 7

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DORN, HEATHER, M., MRS., Date of Receipt Mailing Address 1385 CLEAR CREEK DR. 2025 City Zip Code State Transaction ID: SA11A.56458 **ROCHESTER HILLS** 48306-3582 Amount of Each Receipt this Period FEC ID number of contributing 4000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **NOVARA LAW GROUP ATTORNEY** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 4000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DUNN, CHARLES, A., MR., Date of Receipt Mailing Address 30870 KIRK LN. 06 2025 City State Zip Code Transaction ID: SA11A.56447 **FRANKLIN** MI 48025-2160 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BE INFORMATION REQUESTED PER BEST EFFORTS CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FICKEL, JAMES, , , Date of Receipt Mailing Address 1906 BREMEN ST 03 2025 City State Zip Code Transaction ID: SA11A.40576 TX **AUSTIN** 78703-2910 Amount of Each Receipt this Period FEC ID number of contributing C 13000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NONE **RETIRED** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 13000.00 Other (specify) 18500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GANDHI, MILAN, P., , Date of Receipt Mailing Address 26222 TELEGRAPH RD SUITE 100 13 2025 SUITE 100 State City Zip Code Transaction ID: SA11A.53702 SOUTHFIELD 48033-5318 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NORTHLAND RADIOLOGY **ADMINISTRATOR** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** GHAFFAR, AAMER, , , Date of Receipt Mailing Address 1520 ARTAIUS PKWY UNIT 06 2025 7195 City State Zip Code Transaction ID: SA11A.53686 LIBERTYVILLE IL 60048-7979 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) HEALTHCARE TECHNOLOGY **RXCOPILOTS** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. GLOVER, SCOTT, , , Date of Receipt Mailing Address 211 N ALICE AVE 2025 17 City State Zip Code Transaction ID: SA11A.55076 MI 48307-1807 ROCHESTER Amount of Each Receipt this Period FEC ID number of contributing 3500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CIENA HEALTHCARE ASSOCIATE GENERAL COUNSEL CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) 6500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 

	FOI	R LINE	NU	MBER	:	PAGE	. 1	I4 OF	:	54
Use separate schedule(s) for each category of the	(che	eck only	or	ne)						
Detailed Summary Page	×	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name GRANIERI, ROBERT, , , Date of Receipt Mailing Address 565 BROOME ST 2025 11 City Zip Code State Transaction ID: SA11A.40575 NY **NEW YORK** 10013-1588 Amount of Each Receipt this Period FEC ID number of contributing 123900.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) JANE STREET CAPITAL **FOUNDER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 123900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. GREWAL, PARGAT, S., , Date of Receipt Mailing Address 6765 MEADOWLAKE RD. 06 2025 City State Zip Code Transaction ID: SA11A.56454 **BLOOMFIELD HILLS** MI 48301-2833 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **REAL ESTATE GREWAL DEVELOPMENT** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name HADDON, JOSEPHINE, , MRS., Date of Receipt Mailing Address 2055 RIVER RD. 2025 City State Zip Code Transaction ID : SA11A.56461 MI ST. CLAIR 48079-4251 Amount of Each Receipt this Period FEC ID number of contributing 375.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS **INFORMATION REQUESTED PER BES** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 125275.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

mage# 202300213103133010												
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)			FOR LINE NUMBER: PAGE 15 OF 54 (check only one)							
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a		11b	11c	12				
				13		14	15	16	17			
Any information copied from such Reports and a or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full)												
angle Lisa McClain Leadership Fund												
Full Name of Individual (Last, First, Middle Ir A. HADDON, MICHAEL, , ,	nitial) or Full O	rganization Name		ate of	Rece	eipt						
Mailing Address 2055 NORTH RIVER RD			Г	м = м 06	/	27	) / Y	2025	7			
City	State	Zip Code			actio	_	SA11A.56		_			
ST. CLAIR	MI	48079-4251					Receipt this					
FEC ID number of contributing federal political committee.	С							375.00	)			
Name of Employer (for Individual)	Occi	upation (for Individual)	— i	Me	emo I	Item	7					
AVI		NER	C	—I Ontri	BLITI	ON						
Receipt For:	Aggregate	Year-to-Date ▼		OIVIIII	D011	014						
Primary General		375.00	7									
Other (specify) ▼		373.00	4									
Full Name of Individual (Last, First, Middle Ir HARRIS, JON, , ,	nitial) or Full O	rganization Name	С	ate of	Rece	eipt						
Mailing Address 757 THIRD AVE 6A				M M M	/	26		2025	1			
City NEW YORK	State NY	Zip Code 10017-2013					SA11A.56		_			
FEC ID number of contributing				inount	01 _	.doi! i	tooopt tric		, –			
federal political committee.	C		_	-				1000.00				
Name of Employer (for Individual) AIM13	Occ CE	upation (for Individual) O	CC	Me ONTRI	emo I BUTI							
Receipt For:	Aggregate	Year-to-Date ▼				• • •						
Primary General Other (specify) ▼		1000.00	1									
		4										
Full Name of Individual (Last, First, Middle Ir HEIGHT, RYAN, , ,	nitial) or Full O	rganization Name		ate of	Rece	eipt						
Mailing Address 4545 MONTGOMERY DR				M = M 06	/	12		2025	7			
City		Zip Code		Trans	actio	n ID :	SA11A.5	3694				
SHELBY TOWNSHIP	MI	48316-3923	A	mount	of E	ach F	Receipt this	s Period				
FEC ID number of contributing federal political committee.	С	Occupation (for Individual)					. , .	3500.00	)			
Name of Employer (for Individual)	Occi					Item						
HERITAGE DIALYSIS	CEC	' '	c	 ONTRI	IBUTI	ION						
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify)		3500.00										

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

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

4875.00

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

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

lmage# 202508219789793817			
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 OF 54 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  Lisa McClain Leadership Fund			
Full Name of Individual (Last, First, Middle Init  HERNANDEZ, SHANE, , MR.,  Mailing Address 1423 18TH STREET	Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y		
City PORT HURON	State MI	Zip Code 48060-5622	Transaction ID : SA11A.56432  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) ASSOCIATED BUILDERS AND CONTRACTOR	- 1	upation (for Individual) SIDENT	Memo Item  CONTRIBUTION
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	]
Full Name of Individual (Last, First, Middle Init HUSSEIN, NIGAR, , ,	ial) or Full O	rganization Name	Date of Receipt
Mailing Address 4070 GRATIOT AVE	Ta: ·	I	06 19 2025
City PORT HURON	State MI	Zip Code 48060-1531	Transaction ID : SA11A.55085  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual)  NONE	<b>I</b>	upation (for Individual) TIRED	Memo Item CONTRIBUTION
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250,00	]
Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name	

Receipt For: Aggrega Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Fu c. ISLAM, AZHAR, , , Date of Receipt Mailing Address 1339 BLOOMINGDALE DR 2025 06 16 City State Zip Code Transaction ID : SA11A.53716 MI 48085-5114 **TROY** Amount of Each Receipt this Period FEC ID number of contributing C 3500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CIENA HEALTH CARE **ACCOUNTANT** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) 4000.00

FOR LINE NUMBER: PAGE 17 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name JACKSON, RAYNARD, , MR., Date of Receipt Mailing Address P.O. BOX 2404 01 2025 City Zip Code State Transaction ID: SA11A.39425 WASHINGTON DC 20013-2404 Amount of Each Receipt this Period FEC ID number of contributing 25000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RAYNARD JACKSON & ASSO LLC** CEO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. JUNAID, ANSIR, , , Date of Receipt Mailing Address 3900 PARK EAST DR 06 09 2025 SUITE 101 City State Zip Code Transaction ID: SA11A.53683 **BEACHWOOD** OH 44122-4359 Amount of Each Receipt this Period FEC ID number of contributing 3500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SUPPLY SIDE USA CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name KALASHO, ONEL, , , Date of Receipt Mailing Address 7201 S OAK CT W 2025 18 State Zip Code Transaction ID: SA11A.55081 MI WEST BLOOMFIELD 48323-2078 Amount of Each Receipt this Period FEC ID number of contributing C 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **DIRECTOR ODX HEALTH** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 7000.00 Other (specify) 35500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 

Primary

Other (specify)

General

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Ima	age# 202508219789793819						
	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 OF 54 (check only one)    X   11a			
	y information copied from such Reports and for commercial purposes, other than using the	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Α.	Full Name of Individual (Last, First, Middle In KAREEM, YOUSIF, , ,	itial) or Full C	Organization Name	Date of Receipt			
	Mailing Address 3490 LINCOLNSHIRE CT			05 22 2025			
	City ROCHESTER HILLS	State MI	Zip Code 48309-4526	Transaction ID : SA11A.49418  Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		1000.00			
	Name of Employer (for Individual) BLACK TIE EVENT DECOR	1	cupation (for Individual) ERATIONS	Memo Item CONTRIBUTION			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00				
В.	Full Name of Individual (Last, First, Middle In KATTULA, ROBERT, , ,  Mailing Address 4306 BRIGHTWOOD DR	iitial) or Full C	Organization Name	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID : SA11A.55083			
	FEC ID number of contributing federal political committee.	С	48085-7006	Amount of Each Receipt this Period  1000.00			
	Name of Employer (for Individual) K&B CAPITAL	<b>I</b>	cupation (for Individual) PLOYEE	Memo Item CONTRIBUTION			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00				
<u>с</u> .	Full Name of Individual (Last, First, Middle Ir KELLO, LEILA, , ,	itial) or Full C	Organization Name	Date of Receipt			
Mailing Address 5735 FORMAN DR		State	Zip Code	06 06 2025  Transaction ID : SA11A.50847			
	City BLOOMFIELD HILLS	MI	48301-1156	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		7000.00			
	Name of Employer (for Individual) CHALDEAN COMMUNITY FOUNDATION	I	cupation (for Individual) ECTOR OF DEVELOPMENT	Memo Item CONTRIBUTION			
	Receipt For:	Angregate	Year-to-Date ▼				

Aggregate Year-to-Date ▼

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

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

7000.00

9000.00

FOR LINE NUMBER: PAGE 19 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name KENDRICK, ANN, R., MRS., Date of Receipt Mailing Address 1745 MINNESOTA AVE. 2025 City Zip Code State Transaction ID: SA11A.56442 **MARYSVILLE** 48040-1653 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KHURANA, ANDREW, , , Date of Receipt Mailing Address 5853 CLEARVIEW DR 06 18 2025 City State Zip Code Transaction ID: SA11A.55079 **TROY** MI 48098-2449 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **ATTORNEY** KHURANA LAW FIRM CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name KINSLEY, EDWARD, R., MR., III Date of Receipt Mailing Address 7074 SUNSET DR. 2025 City State Zip Code Transaction ID: SA11A.56444 MI LEXINGTON 48450-9209 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS **INFORMATION REQUESTED PER BES** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS			for each category of the		11a		11b		11c	12		
			Detailed Summary Page		13		14		15	16	17	
	y information copied from such Reports and State for commercial purposes, other than using the na								oliciting	contribu	ıtions	
\	NAME OF COMMITTEE (In Full)											
$\rangle$	Lisa McClain Leadership Fund											
١.	Full Name of Individual (Last, First, Middle Initial) KLEIN, YONI, , ,	or Full Or	ganization Name	D	ate of	Re	ceipt					
	Mailing Address 17093 ALTA VISTA PL	Chaha	7in Code	06 11 2025								
	City SOUTHFIELD	State MI	Zip Code 48075-1933						A11A.5			
			.00.0 1000	- A	mount	or	Eacn	Red	ceipt th	is Period		
	FEC ID number of contributing federal political committee.	C		L			,	_	-	1500	.00	
	Name of Employer (for Individual) SELF-EMPLOYED		pation (for Individual) LTHCARE		Me ONTRI		Item					
	Receipt For:	agregate \	Year-to-Date ▼	7 ~		D0 1	11011					
	Primary General Other (specify) ▼	33 33 111	1500.00									
3.	Full Name of Individual (Last, First, Middle Initial) KOZAK, JOHN, , ,	or Full Or	ganization Name	D	ate of	Re	ceipt					
	Mailing Address 1187 N CRANBROOK RD			06 16 2025								
	City	State	Zip Code	Transaction ID : SA11A.53708  Amount of Each Receipt this Period								
	BLOOMFIELD HILLS	MI	48301-2305								I	
	FEC ID number of contributing federal political committee.	С			Ξ		,	_	7	3500	.00	
	Name of Employer (for Individual) SELF-EMPLOYED		pation (for Individual) AD AND MILK DELIVERY	CC	Me ONTRI		Item	1				
		ggregate \	Year-to-Date ▼									
	Primary General  Other (specify) ▼		3500.00									
 >.	Full Name of Individual (Last, First, Middle Initial) KROLL, SAMUEL, , ,	or Full Or	ganization Name	D	ate of	Re	ceipt					
	Mailing Address 4704 LITTLE JOHN RD			] [	M = M	/		17	/ Y	2025	Y	
	City VIRGINIA BEACH	State VA	Zip Code 23455-4706	^					A11A.5	<b>5077</b> is Period		
	EEC ID number of contributing	-1 '			mount	UI	Lacil	1160	ceipt til	13 1 E1100		
	federal political committee.		ļĻ	-	_	9	_		3500	.00		
	Name of Employer (for Individual)	I	pation (for Individual)	7 L	Me	emo	Item	1				
	WILLIAMS MULLEN	LAW	YER	co	ONTRI	BUT	TION					
	Receipt For:  Primary General	aggregate \	Year-to-Date ▼									
	Other (specify)		3500.00									
s	UBTOTAL of Receipts This Page (optional)						,			8500	00	
T	OTAL This Period (last page this line number only	·)		Ī					45			
	·	-					J		7			

Receipt For:

Primary

Other (specify)

General

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Image# 202508219789793822								
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 OF 54 (check only one)    X   11a				
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Lisa McClain Leadership Fund  Full Name of Individual (Last, First, Middle In KUPELIAN, PETER, B., MR., Mailing Address 3947 OAKLAND DR.  City BLOOMFIELD HILLS  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  SELF EMPLOYED  Receipt For:  Primary General Other (specify)   General	State MI	Organ Ccupat	nization Name  Zip Code 48301-3254	on for the purpose of soliciting contributions				
Full Name of Individual (Last, First, Middle In LA FLEUR, AMY, , ,  Mailing Address 9016 WHISPERING PINES In City  SALINE  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  CIENA HEALTHCARE  Receipt For:  Primary General  Other (specify)	State MI	ccupa SVP OI	zip Code 48176-9235  tion (for Individual) PERATIONS ar-to-Date ▼ 3500.00	Date of Receipt  M M M / D D / 2025  Transaction ID : SA11A.53718  Amount of Each Receipt this Period  3500.00  Memo Item  CONTRIBUTION				
. , , , , , , , , , , , , , , , , , , ,			Zip Code 48097-3209  tion (for Individual) MATION REQUESTED PER BES	Date of Receipt    M				

Aggregate Year-to-Date ▼

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

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

500.00

FEC Schedule A (Form 3X) Rev. 06/2016

4500.00

Other (specify)

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

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

mage# 202506219769793623								
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 OF 54 (check only one)					
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)								
Lisa McClain Leadership Fund  Full Name of Individual (Last, First, Middle In LIN, TAO, , ,	itial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2701 BENVENUE AVE  City BERKELEY	State CA	Zip Code 94705-1201	04 03 2025  Transaction ID : SA11A.40578  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.  Name of Employer (for Individual)	C	upation (for Individual)	5000.00 Memo Item					
METR Receipt For:  Primary General Other (specify) ▼	MEN	MBER OF TECHNICAL STAFF  Year-to-Date ▼  7000.00	CONTRIBUTION					
Full Name of Individual (Last, First, Middle In LITTLE, BOB, , MR.,  Mailing Address 14625 SHIRLEY AVE  City WARREN  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) NONE  Receipt For:  Primary General Other (specify)	State MI	Zip Code 48089-1505  upation (for Individual) ΓIRED  Year-to-Date ▼  250.00	Date of Receipt  M M / 19 / 2025  Transaction ID : SA11A.55086  Amount of Each Receipt this Period  250.00  Memo Item  CONTRIBUTION					
Full Name of Individual (Last, First, Middle In M, IKE, , ,  Mailing Address 172 HUNDRED OAKS  City TOMS RIVER  FEC ID number of contributing federal political committee.	State NJ	Zip Code 08755-0983	Date of Receipt  M M M / 13 / 2025  Transaction ID: SA11A.53703  Amount of Each Receipt this Period  3500.00					
Name of Employer (for Individual) WORLD WIDE LAND TRANSFER Receipt For: Primary General Other (specify)	TITL	upation (for Individual) E INSURANCE  Year-to-Date ▼  3500.00	Memo Item CONTRIBUTION					

8750.00

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 OF 54 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Lisa McClain Leadership Fund  Full Name of Individual (Last, First, Middle In MAHMOOD, YUSUF, , , Mailing Address 1831 KALORAMA RD NW  City  WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  RAND CORPORATION  Receipt For:  Primary  General  Other (specify)   Other (specify)	State DC Occurrence	ddress of any political committee	
Full Name of Individual (Last, First, Middle In MALIK, ASAD, , ,  Mailing Address 900 E LONG LAKE RD  City BLOOMFIELD HILLS  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  AMERILODGE GROUP  Receipt For:  Primary General Other (specify)	State MI  C  Occipre	Zip Code 48304-2554  upation (for Individual) ESIDENT & CEO  Year-to-Date ▼  3500.00	Date of Receipt  Mo6 16 2025  Transaction ID: SA11A.53707  Amount of Each Receipt this Period  3500.00  Memo Item  CONTRIBUTION
Full Name of Individual (Last, First, Middle In MALIK, MUNAZZA, , , ,  Mailing Address 220 HADSELL DR.  City	nitial) or Full O	rganization Name	Date of Receipt  06 16 2025  Transaction ID : SA11A.53712

federal political committee. Name of Employer (for Individual) AMERILODGE GROUP Receipt For: Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) c. MALIK, MUNAZZA, , , Mailing Address 220 HADSELL DR. **BLOOMFIELD HILLS** 48302-0436 Amount of Each Receipt this Period FEC ID number of contributing C 3500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CIENA HEALTHCARE MANAGEMENT INC. SR. FINANCIAL CONTROLLER CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) 8500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

					MBER	:	PAGE	2	24	OF	54
Use separate schedule(s)	(0	he	ck only	or	ıe)						
for each category of the Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16		17
not be sold or used by any pedress of any political committee											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MANNA, MARTIN, , MR., Date of Receipt Mailing Address 2075 WALNIT LAKE ROAD 2025 16 City Zip Code State Transaction ID: SA11A.53711 WEST BLOOMFIELD 48323-3733 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **PRESIDENT** CHALDEAN CHAMBER OF COMMERCE CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. MANSOUR, PHILLIP, , , Date of Receipt Mailing Address 6775 DALY RD 05 19 2025 City State Zip Code Transaction ID: SA11A.46168 WEST BLOOMFIELD MI 48322-4592 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **OWNER DKI DEMOLITION** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. MARVET, IKE, , , Date of Receipt Mailing Address 172 HUNDRED OAKS 10 2025 Transaction ID : SA11A.53685 City State Zip Code NJ TOMS RIVER 08755-0983 Amount of Each Receipt this Period FEC ID number of contributing 3500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) WORLD WIDE LAND TRANSFER TITLE INSURANCE CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) 9000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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SC	CHEDULE A (FEC Form 3X)	Γ			FOR LINE NUMBER: PAGE 25 OF 5										
ITI	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(		ck only		´ _							
			Detailed Summary Page		×	11a 13		11b	11c 15	12		17			
	y information copied from such Reports and State for commercial purposes, other than using the											S			
$\overline{\ }$	NAME OF COMMITTEE (In Full)														
$\rangle$	Lisa McClain Leadership Fund														
Α.	Full Name of Individual (Last, First, Middle Initia MCCORMICK, TOM, , ,	al) or Full Or	ganization Name		D	ate of	Red	ceipt							
	Mailing Address 824 BACK BAY					M = M 06	/	17	/ Y	2025	Y				
	City	State	Zip Code			Trans	acti	on ID : S	A11A.5	5072					
	DELAFIELD	WI	53018-1528		Α	mount	of I	Each Re	ceipt th	is Period	t				
	FEC ID number of contributing federal political committee.	С				Ξ		,	7	1500	.00				
	Name of Employer (for Individual)	Occu	pation (for Individual)			Me	emo	Item							
	CLAREST HEALTH	ССО	·		C	 ONTRI	RUT	TION							
	Receipt For:	Aggregate \	Year-to-Date ▼		•										
	Primary General		4500.00	71											
	Other (specify) ▼		1500.00	_											
_	Full Name of Individual (Last, First, Middle Initia MIRZA, TALHA, , ,	al) or Full Or	ganization Name			ate of	Do:	coint							
٠.	Mailing Address 33259 DEQUINDRE RD			-		M = M	ne(	ceipt	/ V	YY	V -				
	Maning / Marious 33239 DEQUINDRE RD					06	'	18		2025	_ T				
	City	State	Zip Code		ď	Transa	■ actio	on ID : S	A11A.5	5078					

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.	С	3500.00
Name of Employer (for Individual) CIENA HEALTHCARE	Occupation (for Individual) ACCOUNTANT	Memo Item  CONTRIBUTION
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	
C. Full Name of Individual (Last, First, Middl MOAWAD, GERARD, , ,  Mailing Address 4806 U ST NW	e Initial) or Full Organization Name	Date of Receipt  06 12 2025
City WASHINGTON	State Zip Code DC 20007-1546	Transaction ID : SA11A.53691
FEC ID number of contributing federal political committee.	C 20007-1340	Amount of Each Receipt this Period
Name of Employer (for Individual) MBH MANAGEMENT	Occupation (for Individual) CEO	Memo Item CONTRIBUTION
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  7000.00	
SUBTOTAL of Receipts This Page (optional	ıl)	6500.00

48083-4628

FOR LINE NUMBER: PAGE 26 OF Use separate schedule(s) for each category of the (check only one)

TEMIZED RECEIL 10		Detailed Summary Page		11a 13		11b	b	11c	12											
Any information copied from such Reports ar or for commercial purposes, other than using				r the																
NAME OF COMMITTEE (In Full)																				
$\Big angle$ Lisa McClain Leadership Fur	nd																			
Full Name of Individual (Last, First, Middle MOAWAD, GERARD, , ,	e Initial) or Full C	rganization Name	D	ate of	Re	ceip	ot													
Mailing Address 4806 U ST NW				M = M 06	′	D	12	/ Y	2025	Y										
City WASHINGTON	State DC	Zip Code 20007-1546		Transaction ID : SA11A.53693  Amount of Each Receipt this Period																
FEC ID number of contributing federal political committee.	С		5500.00																	
Name of Employer (for Individual) MBH MANAGEMENT									Memo Item CONTRIBUTION											
Receipt For:  Primary General  Other (specify) ▼	]																			
Full Name of Individual (Last, First, Middle MURPHY, KEVIN, , ,	, 	rganization Name	D	ate of	Re	ceip	ot													
Mailing Address 38371 STATE ROUTE 12	06 / 12 / 2025 Transaction ID : SA11A.53689																			
City CLAYTON	State NY	Zip Code 13624-3319							3689 is Period											
FEC ID number of contributing federal political committee.	С		7000.00																	
Name of Employer (for Individual) MSKL, INC	Occ MS	upation (for Individual) KL	Memo Item CONTRIBUTION																	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 7000.00	]																	
Full Name of Individual (Last, First, Middle NAJOR, JASON, , ,	e Initial) or Full C	rganization Name	D	ate of	Re	ceip	ot													
Mailing Address 7220 ESSEX DR  City	State	Zip Code	] [	M M M M 06	/ acti	L	01 ID - S	/ Y	2025	Y										
WEST BLOOMFIELD	MI	48322-1125	A						is Period											
FEC ID number of contributing federal political committee.	С			_	_	,		7	1000.0	00										
Name of Employer (for Individual) SUPER FAIR CELLULAR	upation (for Individual) )	Memo Item CONTRIBUTION																		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	]																	
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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) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name NOVARA, GARY, W., MR., Date of Receipt Mailing Address 1335 ECHO CT. 2025 City Zip Code State Transaction ID: SA11A.56430 **BLOOMFIELD HILLS** 48302-1936 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) **NOVARA LAW GROUP ATTORNEY** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 7000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. NOVARA, MICHAEL, A., MR., Date of Receipt Mailing Address 2816 TURTLE GROVE CT. 06 2025 City State Zip Code Transaction ID: SA11A.56457 **BLOOMFIELD HILLS** MI 48302-0780 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **ATTORNEY NOVARA LAW GROUP** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 7000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. OCONNOR, JOSEPH, , , Date of Receipt Mailing Address 880 W LONG LAKE RD 2025 09 City State Zip Code Transaction ID: SA11A.53684 MI **TROY** 48098-4507 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **EXECUTIVE \/**|7| CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 15000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS 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) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name ORAM, MANSOUR, , , Date of Receipt Mailing Address 28423 ORCHARD LAKE ROAD 18 2025 City Zip Code State Transaction ID: SA11A.55082 **FARMINGTON HILLS** 48334-2971 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) INTERNATIONAL OUTDOOR COO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ORLANS, LINDA, , MS., Date of Receipt Mailing Address 280 HARMON STREET 06 2025 City State Zip Code Transaction ID: SA11A.56436 **BIRMINGHAM** MI 48009-1352 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BE CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 7000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. OSMAN, EDDIE, , , Date of Receipt Mailing Address 29330 S WIXOM RD 2025 14 City State Zip Code Transaction ID: SA11A.53704 MI **WIXOM** 48393-3424 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) WIXOM QUICK STO **PRESIDENT** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 10000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt PATEL, RAJAN, G., , Mailing Address 18198 SHELLEY POND CT. 2025 City Zip Code State Transaction ID: SA11A.56460 **NORTHVILLE** 48168-3543 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **OPTALIS HEALTHCARE** CEO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 7000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PETITPREN, PAMELA, , MRS., Date of Receipt Mailing Address 4037 SCOTT B DR 06 25 2025 City State Zip Code Transaction ID: SA11A.56478 SAINT CLAIR MI 48079-3564 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **RETIRED** NONE CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PITITPREN, DEAN, S., MR., Date of Receipt Mailing Address 34 WAVERLY LN. 2025 City State Zip Code Transaction ID : SA11A.56459 MI **GROSSE POINTE FARM** 48236-3040 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS **INFORMATION REQUESTED PER BES** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 7500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 30 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12 13 14 15 16

for each category of the Detailed Summary Page 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) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt RAFIQ, RABIA, , , Mailing Address 27235 WINTERSET CIR 2025 16 City Zip Code State Transaction ID: SA11A.53713 **FARMINGTON HILLS** 48334-4065 Amount of Each Receipt this Period FEC ID number of contributing 3500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CIENA HEALTHCARE **ACCOUNTS PAYABLE** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SAMONA, MAZIN, , , Date of Receipt Mailing Address 1100 WEST MAPLE ROAD 06 06 2025 City State Zip Code Transaction ID: SA11A.50848 **TROY** MI 48084-5352 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) WILD BILL'S TOBACCO CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 7000.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SARAFA, MICHAEL, , , Date of Receipt Mailing Address 35267 STRATTON HILL COURT 2025 23 Zip Code State Transaction ID: SA11A.49419 MI **FARMINGTON HILLS** 48331-4508 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **ATTORNEY BUTZEL LONG** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 11500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 

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NAME OF COMMITTEE (In Full)  Lisa McClain Leadership Fur	nd												
Full Name of Individual (Last, First, Middle SCHREINER, SAMUEL, S., ,	Initial) or Full O	rganization Name	[	Date of	Re	ceipt							
Mailing Address 512 37TH STREET  APT 3	la.			M = M 04	/	0	9	/ Y	2025	Y			
City PITTSBURGH	State PA	Zip Code 15201-1283	Transaction ID : SA11A.40579  Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		6000.00										
Name of Employer (for Individual) AURORA INNOVATION		upation (for Individual) TWARE ENGINEER	 c	ONTRI		Item							
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 13000.00	]										
Full Name of Individual (Last, First, Middle S. SCHWARTZ, PETER, , ,	Initial) or Full O	rganization Name		Date of	Re	ceipt							
Mailing Address 2707 W MAPLE				М _ М	/	D 1	<sup>D</sup> 7	/ Y	2025	Y			
City BLOOMFIELD HILLS	State MI	Zip Code 48301-						A11A.5 ceipt th	<b>5073</b> is Perioc				
FEC ID number of contributing federal political committee.	C			_		-	_	-	1500	00			
Name of Employer (for Individual) SCHWARTZ & CO		upation (for Individual) ESTMENTS	c	Me ONTRI		Item							
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	]										
Full Name of Individual (Last, First, Middle SCHWEIHOFER, STEVEN, , MR		rganization Name	[	Date of	Re	ceipt							
Mailing Address 580 WADHAMS				M = M	1	D	D	/ Y	YYY	Υ			

Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Fu SCHWEIHOFER, STEVEN, , MR., Mailing Address 580 WADHAMS 2025 06 27 Zip Code City State Transaction ID: SA11A.56439 MI 48074-4320 KIMBALL Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) INFORMATION REQUESTED PER BEST EFFORTS **INFORMATION REQUESTED PER BES** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 7750.00 SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 32 OF 54
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NAME OF COMMITTEE (In Full)			
/ Lisa McClain Leadership Fund			
Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	
A. SERRATO, RAMON, , ,			Date of Receipt
Mailing Address 3443 E FORT LOWELL RD			06 18 2025
City	State	Zip Code	Transaction ID : SA11A.55080
TUCSON	AZ	85716-1617	Amount of Each Receipt this Period
FEC ID number of contributing	С		500.00
federal political committee.			500.00
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
SERRATO CORPORATION	CEC	)	CONTRIBUTION
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		500.00	1
Other (specify) ▼		300.00	l
Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	
3. SHINA, BASIM, , ,	any or rum o	rgamzation Hamo	Date of Receipt
Mailing Address 7037 DANDISON BLVD			M = M / D = D / Y = Y = Y
-	la		06 27 2025
City WEST BLOOMFIELD	State MI	Zip Code 48324-2828	Transaction ID : SA11A.56431
	IVII	40324-2020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1500.00
Name of Employer (for Individual)		upation (for Individual)	Memo Item
INFORMATION REQUESTED PER BEST EFFO Receipt For:		ORMATION REQUESTED PER E	CONTRIBUTION
Primary General	Aggregate	Year-to-Date ▼	
Other (specify) ▼		1500.00	
		7-1-1-7-1-1-4-1-1	4
Full Name of Individual (Last, First, Middle Initial SIRAJ, OMAIR, , ,	al) or Full O	rganization Name	Date of Receipt
Mailing Address 815 COVENTRY LANE			M - M / D - D / Y - Y - Y - Y
-	Ta		06 12 2025
City OAK BROOK	State IL	Zip Code 60523-1464	Transaction ID : SA11A.53695
-	<del></del>	00020 1404	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		3500.00
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
CHESTNUT HEALTH	CEC	, ,	CONTRIBUTION
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		3500.00	1
Other (specify)		3300.00	1

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Lisa McClain Leadership Fund										
Full Name of Individual (Last, First, Middle In SORENSEN, MELISSA, , ,	itial) or Full O	rganization Name		Date of	f Red	ceipt				
Mailing Address 16591 FREYMAN RD				M M	1	16		2025	Y	
City	State	Zip Code		Trans	actio	on ID	SA11A	.53709		
CYGNET	ОН	43413-9766	/	Amoun	t of E	Each I	Receipt	this Perio	d	
FEC ID number of contributing federal political committee.	С							2500	).00	
Name of Employer (for Individual)	Occi	upation (for Individual)		М	emo	Item				
CIENA HEALTHCARE	СНІ	EF NURSING OFFICER	C	ONTR	IBUT	ION				
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00	1							
Full Name of Individual (Last, First, Middle In STAPLETON, THOMAS, , ,  Mailing Address 8504 WENDELL DR  City	State	Zip Code		Date of 06	/	27		2025 56480	Y	
ALEXANDRIA	VA	22308-2158	/	Amoun	t of E	Each F	Receipt	this Perio	d	
FEC ID number of contributing federal political committee.	С							3000	).00	
Name of Employer (for Individual)	Occ	upation (for Individual)		M	emo	Item				
STAPLETON & ASSOCIATES, LLC	CO	NSULTANT	с	ONTRI	IBUT	ION				
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3000.00								
Full Name of Individual (Last, First, Middle In STOBB, DAVID, , ,	itial) or Full O	rganization Name		Date of	f Red	ceipt				
Mailing Address 1349 TRANQUILITY CT				M M M	/	17		2025	" Y	
City	State MI	Zip Code		Trans	sacti	on ID	: SA11A	.55074	_	
ROCHESTER HILLS	IVII	48306-3579		Amoun	t of E	Each I	Receipt	this Perio	d	
FEC ID number of contributing federal political committee.	С			<u> </u>	_	,	. ,	3500	).00	
Name of Employer (for Individual) CIENA HEALTHCARE	I	upation (for Individual) ORNEY		M CONTR		Item TION				
Receipt For:	Aggregate	Year-to-Date ▼								
Primary   General			- 1							

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		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name THOMAS, DEVIN, , , Date of Receipt Mailing Address 777 E MAIN ST 2025 City Zip Code State Transaction ID: SA11A.55075 WESTFIELD 46074-5300 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) MAJESTIC CARE DIRECTOR OF FINANCE CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TRANDAHL, PAMELA, , , Date of Receipt Mailing Address 968 13TH AVE SE 05 06 2025 SUITE 300 City Zip Code State Transaction ID: SA11A.43564 **SCHAUMBURG** IL 60173-Amount of Each Receipt this Period FEC ID number of contributing 750.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **COMPLIANCE** TRIUMPH HIGHER EDUCATION GROUP (AUGUST CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name TURNER, JOYCE, , , Date of Receipt Mailing Address 3003 EDGEWOOD RD 2025 16 City State Zip Code Transaction ID : SA11A.53714 MI **ERIE** 48133-9711 Amount of Each Receipt this Period FEC ID number of contributing 3500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CIENA HEALTHCARE **BUSINESS INNOVATION** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General 3500.00 Other (specify) 5250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 35 OF 54 (check only one)
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			13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Lisa McClain Leadership Fund	l		
Full Name of Individual (Last, First, Middle I VARTANIAN, SEVAG, , ,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 50641 DRAKES BAY DR			06 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11A.53692
NOVI	MI	48374-2548	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
VARTANIAN CAPITAL MANAGEMENT		ESTMENT ADVISER	CONTRIBUTION
Receipt For:	Aggregate	Year-to-Date ▼	CONTRIBUTION
Primary General	33 3 3		1
Other (specify) ▼	L	250.00	J
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	
3. VERBEKE, CODY, , ,			Date of Receipt
Mailing Address 206 ARTHUR ST			06 12 2025
City	State	Zip Code	Transaction ID : SA11A.53690
YALE	MI	48097-2902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
VERBEKE CONTRACTING	PRI	ESIDENT	CONTRIBUTION
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		250.00	1
Other (specify) ▼		250,00	1
Full Name of Individual (Last, First, Middle In VERTIN, KATHLEEN, M., MRS.,	nitial) or Full C	rganization Name	Date of Receipt
Mailing Address 4 GOLFSIDE DR.			06 27 2025
City	State	Zip Code	Transaction ID : SA11A.56424
SAINT CLAIR	MI	48079-3573	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
RIVER BANK THEATER		NER	CONTRIBUTION
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General			7
Other (specify)		1000.00	

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Other (specify)

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Any information copied from such Reports and sor for commercial purposes, other than using the								
NAME OF COMMITTEE (In Full)								
Lisa McClain Leadership Fund								
Full Name of Individual (Last, First, Middle In VON ARX, SYDNEY, , ,	itial) or Full O	rganization Name	D	ate of	Receipt			
Mailing Address 2150 SHATTUCK AVENUE				M M M		D / Y	2025	1
City	State	Zip Code		Trans	action II	) : SA11A.40	)581	
BERKELEY	CA	94704-1345	A	mount	of Each	Receipt this	s Period	
FEC ID number of contributing federal political committee.	С				-	4	12000.00	
Name of Employer (for Individual)	Occi	upation (for Individual)	<b>⊣</b> [	Me	emo Item	1		
METR	MEN	MBER OF TECHNICAL STAFF	C		BUTION			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 12000.00		ONTR	BOTION			
Full Name of Individual (Last, First, Middle In WEISS, ERIC, T., MR.,  Mailing Address 2026 HARBOR VILLAGE	itial) or Full O	rganization Name		Date of		D / Y 27	y y y y 2025	]
City KEEGO HARBOR	State MI	Zip Code 48320-1374				SA11A.56 Receipt this		
FEC ID number of contributing federal political committee.	С				-		1500.00	
Name of Employer (for Individual) NONE	I .	upation (for Individual)			emo Iten	ı		
Receipt For:	Aggregate	Year-to-Date ▼		JIVIIKI	DOTION			
Primary General Other (specify) ▼	33 13 11	1500.00						
Full Name of Individual (Last, First, Middle In YALDO, RUDI, , ,	itial) or Full O	rganization Name	D	ate of	Receipt			
Mailing Address 2707 TURTLE LAKE DR				M M M		29 / Y	2025	1
City	State	Zip Code		Trans	action II	D : SA11A.42	2501	
BLOOMFIELD HILLS	MI	48302-0767	A	mount	of Each	Receipt this	s Period	
FEC ID number of contributing federal political committee.	С			Ξ	,	,	50000.00	
Name of Employer (for Individual) PEARL TRADING LLC	Occu	upation (for Individual)	C		emo Iten IBUTION			
Receipt For: Primary General	Aggregate	Year-to-Date ▼						

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63500.00

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

FOR LINE NUMBER: PAGE 37 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name NEXCARE HEALTH SYSTEMS Date of Receipt Mailing Address 10503 CITATION DR. 2025 City Zip Code State Transaction ID: SA11A.56456 **BRIGHTON** 48116-6549 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General VERIFIED AS FEDERALLY PERMISSIBLE FUNDS: 7000.00 Other (specify) SEE ATTRIBUTION BELOW Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BRANSCUM, JIM, , Date of Receipt Mailing Address 10503 CITATION DRIVE 06 2025 City State Zip Code Transaction ID: SA11A.60733 **BRIGHTON** MI 48116-6549 Amount of Each Receipt this Period FEC ID number of contributing 2170.00 federal political committee. X Memo Item Name of Employer (for Individual) Occupation (for Individual) **PARTNER** NEXCARE HEALTH SYSTEMS LLC CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP ATTRIBUTION 2170,00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name EISENBERG, LEO, , , Date of Receipt Mailing Address 10503 CITATION DRIVE 2025 City State Zip Code Transaction ID: SA11A.60735 MI **BRIGHTON** 48116-6549 Amount of Each Receipt this Period FEC ID number of contributing 2170.00 federal political committee. X Memo Item Name of Employer (for Individual) Occupation (for Individual) NEXCARE HEALTH SYSTEMS LLC **PARTNER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP ATTRIBUTION 2170.00 Other (specify) 7000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... \_\_\_\_\_

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

FOR LINE NUMBER: PAGE 38 OF Use separate schedule(s) (check only one) X 11a 11b 11c 12

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name PERRY, MICHAEL, , , Date of Receipt Mailing Address 10503 CITATION DRIVE 2025 City Zip Code State Transaction ID: SA11A.60738 **BRIGHTON** 48116-6549 Amount of Each Receipt this Period FEC ID number of contributing 70.00 federal political committee. × Memo Item Name of Employer (for Individual) Occupation (for Individual) NEXCARE HEALTH SYSTEMS LLC **PARTNER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP ATTRIBUTION 70.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. PRESTAGE, RICHARD, , , Date of Receipt Mailing Address 10503 CITATION DRIVE 06 2025 City State Zip Code Transaction ID: SA11A.60736 **BRIGHTON** MI 48116-6549 Amount of Each Receipt this Period FEC ID number of contributing 210.00 federal political committee. X Memo Item Name of Employer (for Individual) Occupation (for Individual) **PARTNER** NEXCARE HEALTH SYSTEMS LLC CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP ATTRIBUTION 210,00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SANGSTER, TODD, , , Date of Receipt Mailing Address 10503 CITATION DRIVE 2025 City State Zip Code Transaction ID: SA11A.60737 MI **BRIGHTON** 48116-6549 Amount of Each Receipt this Period FEC ID number of contributing 210.00 federal political committee. X Memo Item Name of Employer (for Individual) Occupation (for Individual) NEXCARE HEALTH SYSTEMS LLC **PARTNER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP ATTRIBUTION 210.00 Other (specify) 0.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 1 9 1 1 9 1 1 9

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

54 FOR LINE NUMBER: PAGE 39 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name WRONSKI, FRANK, , , Date of Receipt Mailing Address 10503 CITATION DRIVE 2025 City Zip Code State Transaction ID: SA11A.60734 **BRIGHTON** 48116-6549 Amount of Each Receipt this Period FEC ID number of contributing 2170.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) NEXCARE HEALTHY SYSTEMS LLC **PARTNER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP ATTRIBUTION 2170.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. SUPERIOR PROPETIES GROUP, LLC Date of Receipt Mailing Address 1615 S. TELEGRAPH RD. 06 06 2025 City State Zip Code Transaction ID: SA11A.50849 **BLOOMFIELD HILLS** MI 48302-0065 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General VERIFIED AS FEDERALLY PERMISSIBLE FUNDS; 7000.00 Other (specify) SEE ATTRIBUTION BELOW Full Name of Individual (Last, First, Middle Initial) or Full Organization Name YATOOMA, CHRISTOPHER, , , Date of Receipt Mailing Address 1615 S TELEGRAPH ROAD 30 2025 Zip Code State Transaction ID: SA11A.61681 MI **BLOOMFIELD HILLS** 48302-0065 Amount of Each Receipt this Period FEC ID number of contributing 7000.00 federal political committee. X Memo Item Name of Employer (for Individual) Occupation (for Individual) SUPERIOR PROPERTIES GROUP LLC **MEMBER** CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP ATTRIBUTION 7000.00 Other (specify) 7000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 

Other (specify)

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

FOR LINE NUMBER: PAGE 40 OF Use separate schedule(s) for each category of the

I OIT LINE	INCIVIDEIL		0 0.				
(check only one)							
<b>X</b> 11a	11b	11c	12				
13	14	15	16	17			

Detailed Summary Page 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) Lisa McClain Leadership Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name TC GOLDMAN & ASSOCIATES Date of Receipt Mailing Address 521 MICHIGAN ST. 2025 City State Zip Code Transaction ID: SA11A.56449 **PORT HURON** 48060-3810 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General **REFUNDED 7/31/2025** 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. THE MIKE COX LAW FIRM, PLLC Date of Receipt Mailing Address 17430 NORTH LAUREL PARK DRIVE 06 2025 **STE 120E** City State Zip Code Transaction ID: SA11A.56433 LIVONIA MI 48152-3981 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CONTRIBUTION Receipt For: Aggregate Year-to-Date ▼ Primary General **REFUNDED 7/31/2025** 500.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	503650.00

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 OF 54 (check only one)			
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)  11a			
	Statements may not be sold or used by any phe name and address of any political committee	person for the purpose of soliciting contributions e to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)  Lisa McClain Leadership Fund	d				
A. ESSHAKI FOR CONGRESS					
Mailing Address P.O. BOX 26141	06 27 2025				
City BIRMINGHAM	State Zip Code MI 48012-	Transaction ID : SA11C.56428  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C C00792754	2000.00			
Name of Employer (for Individual)	Name of Employer (for Individual)  Occupation (for Individual)				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	CONTRIBUTION			
3. CANDICE PAC					
Mailing Address P.O. BOX 7036	lailing Address P.O. BOX 7036				
City NOVI	State Zip Code 48376-7036	Transaction ID : SA11C.56451  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	1000.00			
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item CONTRIBUTION			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	REFUNDED 7/31/2025			
Full Name of Individual (Last, First, Middle HEALTH CARE ASSOCIATION O		Date of Receipt			
Mailing Address 7413 WESTSHIRE DR.	Mailing Address 7413 WESTSHIRE DR.				
City LANSING	State Zip Code MI 48917-8660	Transaction ID : SA11C.56453  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	500.00			
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item CONTRIBUTION			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	VERIFIED AS FEDERALLY PERMISSIBLE FUN			
SUBTOTAL of Receipts This Page (optional).		3500.00			
TOTAL This Period (last page this line numb	er only)				

S	CHEDULE A (FEC Form 3X)		Lloo concrete askadula/->	FOR LINE NUMBER: PAGE 42 OF 54
ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	13 14 15 16 17
	ny information copied from such Reports and Stator commercial purposes, other than using the i			
	NAME OF COMMITTEE (In Full)			
	Lisa McClain Leadership Fund			
Α.	·	Date of Receipt		
	Mailing Address 11180 SUNRISE VALLEY DRIV	06 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11C.55087
	RESTON	VA	20191-5491	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0890830	1500.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
				CONTRIBUTION
	Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		1500.00	
— В.	Full Name of Individual (Last, First, Middle Initial INTERNATIONAL BANK OF COMMERCE			D Date of Receipt
	Mailing Address 1200 SAN BERNARDO	04 01 2025		
	City	State	Zip Code	Transaction ID : SA11C.39426
	LAREDO	TX	78040-6301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C cod	0276592	2500.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item CONTRIBUTION
	Receipt For:	Aggregate	Year-to-Date ▼	CONTRIBUTION
	Primary General Other (specify) ▼		2500.00	]
— С.	Full Name of Individual (Last, First, Middle Initia MICROSOFT CORPORATION STAK	al) or Full C	Prganization Name	Date of Receipt
C.	Mailing Address 1 MICROSOFT WAY	04 29 2025		
	City	State	Zip Code	Transaction ID : SA11C.42500
	REDMOND	WA	98052-8300	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0227546	30000.00
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Receipt For:	Aggregate	Year-to-Date ▼	CONTRIBUTION
	Primary General Other (specify)	Aggregate	30000.00	]
Г				
5	SUBTOTAL of Receipts This Page (optional)			34000.00
Γ.	OTAL This Period (last page this line number of	als:		37500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule	(s)   (check only	FOR LINE NUMBER: PAGE 43 OF 5 (check only one)		
	for each category of the Detailed Summary Pag		22 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)	and made of any po				
Lisa McClain Leadership Fund					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
<sup>A.</sup> ANEDOT	ANEDOT				
Mailing Address 1340 POYDRAS ST STE 1770			04 07 2025		
,	State Zip Code LA 70112		FEC Identification Number		
NEW ORLEANS Purpose of Disbursement	LA 70112				
JFC CC TRANSACTION FEES			C		
Candidate Name		0045 77 77	Transaction ID : SB21B.I3720		
		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disbursen	nent For:	1 71 -	780.90		
Senate	Primary General	I	7		
	Other (specify) ▼		Memo Item		
State: District:			-		
Full Name (Last, First, Middle Initial)			Date of Disbursement		
B. ANEDOT			M M / D D / Y Y Y Y		
Mailing Address 1340 POYDRAS ST STE 1770					
,	State Zip Code		FEC Identification Number		
NEW ORLEANS	LA 70112				
Purpose of Disbursement  JFC CC TRANSACTION FEES			C		
Candidate Name					
Office Sought: House Disbursen	nont For:	Туре	240.30		
	nent For:  Primary General	I	240.30		
	Other (specify)	•	п.,		
State: District:	(/)		Memo Item		
Full Name (Last, First, Middle Initial)					
<sup>C.</sup> ANEDOT			Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address 1340 POYDRAS ST STE 1770			04 12 2025		
	State Zip Code		FFC Identification Number		
NEW ORLEANS	LA 70112		FEC Identification Number		
Purpose of Disbursement	'				
JFC CC TRANSACTION FEES			Transaction ID : SB21B.I3722		
Candidate Name	Amount of Each Disbursement this Period				
Office Sought: House Disbursen	Office Sought: House Disbursement For:				
	Primary Genera	I	7 7		
President	Other (specify) ▼	Memo Item			
State: District:			I Mellio Itelli		
SUBTOTAL of Disbursements This Page (optional)			1981.80		
<b>TOTAL</b> This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 44 OF 54		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , ,			
Lisa McClain Leadership Fund				
Full Name (Last, First, Middle Initial)			Data of Dishuranment	
A. ANEDOT			Date of Disbursement	
Mailing Address 1340 POYDRAS ST STE 1770			04 16 2025	
,	State Zip Code LA 70112		FEC Identification Number	
Purpose of Disbursement	10112			
JFC CC TRANSACTION FEES			C	
Candidate Name			Transaction ID : SB21B.l3777	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For:	-77-	320.30	
	Primary General			
President State: District:	Other (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial)				
3. ANEDOT				
Mailing Address 1340 POYDRAS ST STE 1770				
,	State Zip Code LA 70112		FEC Identification Number	
Purpose of Disbursement			С	
JFC CC TRANSACTION FEES				
Candidate Name		Category/ Type	Transaction ID: SB21B.I3854  Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For:	.,,,,	30.31	
	Primary General		7 7 7	
President State: District:	Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. ANEDOT	ANEDOT			
Mailing Address 1340 POYDRAS ST STE 1770				
,	State Zip Code		FEC Identification Number	
	LA 70112			
Purpose of Disbursement  JFC CC TRANSACTION FEES		· · ·	Transaction ID : SB21B.I3902	
Candidate Name	Candidate Name			
Office Sought: House Disbursem	nent For:	Туре	80.60	
	Primary General		7 7 4	
	Other (specify) ▼	Mama Itam		
State: District:			Memo Item	
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			431.21	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 45 OF 5		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	, , , ,			
Lisa McClain Leadership Fund				
Full Name (Last, First, Middle Initial)			Data of Diahuraamant	
ANEDOT			Date of Disbursement	
Mailing Address 1340 POYDRAS ST STE 1770			05 23 2025	
City NEW ORLEANS	State Zip Code LA 70112		FEC Identification Number	
Purpose of Disbursement	10112		C	
JFC CC TRANSACTION FEES			C	
Candidate Name			Transaction ID : SB21B.I3935	
		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursen			60.30	
	Primary General Other (specify) ▼			
State: District:	outer (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial)				
ANEDOT		Date of Disbursement		
Mailing Address 1340 POYDRAS ST STE 1770	05 26 2025			
City NEW ORLEANS	State Zip Code LA 70112		FEC Identification Number	
Purpose of Disbursement	10.12		C	
JFC CC TRANSACTION FEES		' '		
Candidate Name		Category/ Type	Transaction ID: SB21B.I3936 Amount of Each Disbursement this Period	
Office Sought: House Disbursen	nent For:		161.20	
	Primary General			
State: President District:	Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. ANEDOT	ANEDOT			
Mailing Address 1340 POYDRAS ST STE 1770				
-	State Zip Code		FEC Identification Number	
NEW ORLEANS	LA 70112			
Purpose of Disbursement  JFC CC TRANSACTION FEES		· · · ·	C	
Candidate Name  Category Type			Transaction ID: SB21B.I3949 Amount of Each Disbursement this Period	
Office Sought: House Disbursen				
Senate	Primary General		7 7 7	
President	Other (specify) ▼		Memo Item	
State: District:			I Mario Ram	
SUBTOTAL of Disbursements This Page (optional)			261.80	
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)		FOR LINE NUMBER: PAGE 46 OF (check only one)		
		ategory of the ummary Page	X 21b 28a	22 23 28b 28c	26 27 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)			. , ,		
Lisa McClain Leadership Fund					
Full Name (Last, First, Middle Initial)	<u> </u>			Date of Disham	comont
A. ANEDOT				Date of Disburs	sement
Mailing Address 1340 POYDRAS ST STE 1770				06	11 2025
,	State LA	Zip Code 70112		FEC Identificati	on Number
Purpose of Disbursement	<u>-</u> A	70112			
JFC CC TRANSACTION FEES				C	ID ODOLD HOSE
Candidate Name			Catagory		n ID: SB21B.I4020 h Disbursement this Period
			Category/ Type	Amount of Eac	II DISDUISEITIETIL LITIS PETIOO
Office Sought: House Disbursem	nent For:			1	320.90
	Primary	General			,
	Other (speci	fy) ▼		Memo Item	1
State: District: Full Name (Last, First, Middle Initial)				_	
				Date of Disburs	sement
B. ANEDOT					D / Y Y Y Y
Mailing Address 1340 POYDRAS ST STE 1770					06 13 2025
,		Zip Code		FEC Identificati	on Number
NEW ORLEANS Purpose of Disbursement	LA	70112			
JFC CC TRANSACTION FEES				C	
Candidate Name					n ID : SB21B.I4021 h Disbursement this Period
Office Sought: House Disbursem	nent For:		Туре		993.03
	Primary	General		7	<del>-</del>
President State: District:	Other (specif	fy)		Memo Item	1
Full Name (Last, First, Middle Initial)  C. ANEDOT				Date of Disburs	sement
Mailing Address 1340 POYDRAS ST STE 1770	Mailing Address 1340 POYDRAS ST				
-	State	Zip Code		FEC Identificati	on Number
NEW ORLEANS	LA	70112			OII MUITIDEI
Purpose of Disbursement				C	
			Category/ Type		
Office Sought: House Disbursem	nent For:		i ype		1944.20
	Primary	General		7	7
	Other (specif		Memo Item		
State: District:				ivierno item	
SUBTOTAL of Disbursements This Page (optional)			·····		3258.13
TOTAL This Period (last page this line number only).				1	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 47 OF		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 28a	one)  22 23 26 27 28b 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	<b>71</b>			
Lisa McClain Leadership Fund				
Full Name (Last, First, Middle Initial)			Date of Dishuranment	
ANEDOT			Date of Disbursement	
Mailing Address 1340 POYDRAS ST STE 1770			06 15 2025	
City NEW ORLEANS	State Zip Code LA 70112		FEC Identification Number	
Purpose of Disbursement	70112			
JFC CC TRANSACTION FEES			C	
Candidate Name		Ostana /	Transaction ID : SB21B.I4026	
		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursen			269.20	
	Primary General Other (specify) ▼		П.,	
State: District:	(-p-3)/ <b>V</b>		Memo Item	
Full Name (Last, First, Middle Initial)			Date of Disbursement	
B. ANEDOT	ANEDOT			
Mailing Address 1340 POYDRAS ST STE 1770	STE 1770			
City NEW ORLEANS	State Zip Code LA 70112		FEC Identification Number	
Purpose of Disbursement			C	
JFC CC TRANSACTION FEES				
Candidate Name	h	Category/ Type	Transaction ID: SB21B.I4042 Amount of Each Disbursement this Period	
Office Sought: House Disbursen	nent For:		1183.60	
	Primary General			
State: President District:	Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial)			Date of Dishuraneset	
<sup>C.</sup> ANEDOT			Date of Disbursement	
Mailing Address 1340 POYDRAS ST STE 1770				
-	State Zip Code		FEC Identification Number	
NEW ORLEANS	LA 70112			
Purpose of Disbursement  JFC CC TRANSACTION FEES			Transaction ID : SB21B.I4043	
Candidate Name				
Office Sought: House Disbursen	nent For:	71: -	30.93	
Senate	Primary General		7 7 7	
President	Other (specify) ▼		Memo Item	
State: District:			Monto Rom	
SUBTOTAL of Disbursements This Page (optional)		······	1483.73	
TOTAL This Deviced (first record first Property				
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s	\	FOR LINE NUMBER: PAGE 48 OF (check only one)		
ILIVIIZED DISBURSEIVIEN IS	for each category of the Detailed Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
Lisa McClain Leadership Fund					
Full Name (Last, First, Middle Initial)			Data of Diahuraamant		
A. ANEDOT			Date of Disbursement		
Mailing Address 1340 POYDRAS ST STE 1770			06 29 2025		
City NEW ORLEANS	State Zip Code LA 70112		FEC Identification Number		
Purpose of Disbursement	70112		C		
JFC CC TRANSACTION FEES					
Candidate Name		Category/	Transaction ID: SB21B.I4052 Amount of Each Disbursement this Period		
Office Sought: House Disbursen	nent For:	Type	170.91		
	Primary General				
State: District:	Other (specify) ▼		Memo Item		
Full Name (Last, First, Middle Initial)					
3. ANEDOT	Date of Disbursement				
Mailing Address 1340 POYDRAS ST STE 1770	06 30 2025				
City NEW ORLEANS	State Zip Code LA 70112		FEC Identification Number		
Purpose of Disbursement	Purpose of Disbursement				
JFC CC TRANSACTION FEES Candidate Name	Category/	Transaction ID : SB21B.I4067 Amount of Each Disbursement this Period			
Office Sought: House Disbursen	nent For:	Type	1480.60		
	Primary General Other (specify)				
State: District:			Memo Item		
Full Name (Last, First, Middle Initial)					
CLASSIC CITY	CLASSIC CITY				
Mailing Address 2365 W BROAD ST	Mailing Address 2365 W BROAD ST				
-	State Zip Code		FEC Identification Number		
ATHENS  Purpose of Dishursement	GA 30606		0		
Purpose of Disbursement JFC BANK FEES			C Transaction ID : SB21B.I3719		
Candidate Name Categ			Amount of Each Disbursement this Period		
Office Sought: House Disbursen	Office Sought:   House   Disbursement For:				
Senate	Primary General		7 7 7		
	Other (specify) ▼		Memo Item		
State: District:					
SUBTOTAL of Disbursements This Page (optional)		······	1671.51		
TOTAL This Period (last page this line number only)					

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only			
	for each category of the Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
Lisa McClain Leadership Fund					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. CLASSIC CITY					
Mailing Address 2365 W BROAD ST			06 16 2025		
,	State Zip Code GA 30606		FEC Identification Number		
Purpose of Disbursement			C		
JFC BANK FEES			Transaction ID : SB21B.I4025		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disbursem	nent For:  Primary General		20.00		
	Other (specify) ▼		Memo Item		
Full Name (Last, First, Middle Initial)			_		
B. CMDI	,				
Mailing Address 1593 SPRING HILL ROAD STE 400	04 23 2025				
TYSONS CORNER	State Zip Code VA 22182		FEC Identification Number		
Purpose of Disbursement	·				
JFC SOFTWARE DATABASE  Candidate Name	Category/ Type	Transaction ID : SB21B.I3795 Amount of Each Disbursement this Period			
	Primary General	21	250.00		
President State: District:	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)  C. CMDI	Date of Disbursement				
Mailing Address 1593 SPRING HILL ROAD STE 400	Mailing Address 1593 SPRING HILL ROAD				
	State Zip Code		FEC Identification Number		
TYSONS CORNER	VA 22182		C C		
Purpose of Disbursement JFC SOFTWARE DATABASE	Purpose of Disbursement  JFC SOFTWARE DATABASE				
Candidate Name	Candidate Name  Category/ Type				
	Primary General	21.5	250.00		
State: District:	Other (specify) ▼		Memo Item		
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).		·····•	520.00		

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 50 OF		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)				
Lisa McClain Leadership Fund				
<u>'</u>				
Full Name (Last, First, Middle Initial)  A. CADI			Date of Disbursement	
A. CMDI			M M / D D / Y Y Y Y	
Mailing Address 1593 SPRING HILL ROAD			06 24 2025	
STE 400				
City TYSONS CORNER	State Zip Code VA 22182		FEC Identification Number	
Purpose of Disbursement	22102			
JFC SOFTWARE DATABASE			C	
Candidate Name		Cotocomil	Transaction ID : SB21B.I4062 Amount of Each Disbursement this Period	
		Category/ Type	Amount of Lacit Dispulsement this Period	
Office Sought: House Disburser	nent For:		250.00	
Senate	Primary General		7 7	
President	Other (specify) ▼		Memo Item	
State: District:				
Full Name (Last, First, Middle Initial)			Data of Diahumana	
<sup>3.</sup> KB STRATEGIC			Date of Disbursement	
Mailing Address 3213 DUKE ST			06 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
STE 700	STE 700			
,	State Zip Code VA 22314		FEC Identification Number	
ALEXANDRIA Purpose of Disbursement	22314		С	
JFC FUNDRAISING CONSULTING	•			
Candidate Name		Category/	Transaction ID: SB21B.I3955 Amount of Each Disbursement this Period	
		Type	Carr C. Each Blobardonicht and Toriou	
Office Sought: House Disburser	nent For:		15883.98	
Senate	Primary General			
President	Other (specify)		Memo Item	
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
MANGO CONSULTING LLC				
Mailing Address P O BOX 91173	05 07 2025			
Oib.	24-4 Zii. C. I			
City SAUSTIN	State Zip Code 78709		FEC Identification Number	
Purpose of Disbursement	10109		C	
JFC MANAGEMENT CONSULTING				
Candidate Name				
	Amount of Each Disbursement this Period 3754.64			
	Office Sought: Disbursement For:			
Senate	Primary General			
President	Other (specify) ▼		Memo Item	
State: District:			_	
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SUBTOTAL of Disbursements This Page (optional)		·····•	1000.02	
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	•
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NAME OF COMMITTEE (In Full)	and address of drip point	Sai Sommittoo to	Sales commenced non outri committee.
Lisa McClain Leadership Fund			
Full Name (Last, First, Middle Initial)			Data of Dishuranment
PROFESSIONAL DATA SERVICES			Date of Disbursement
Mailing Address 824 S MILLEDGE AVENUE STE 101			06 30 2025
,	State Zip Code GA 30605		FEC Identification Number
Purpose of Disbursement	30003		C
JFC COMPLIANCE CONSULTING			
Candidate Name		Category/	Transaction ID : SB21B.I4097  Amount of Each Disbursement this Period
		Type	
Office Sought: House Disbursem			3075.78
	Primary General		
State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. SPARTAN STRATEGIES		Date of Disbursement	
Mailing Address 625 SLATERS LANE APT 103	,		06 09 2025
•	State Zip Code VA 22314		FEC Identification Number
ALEXANDRIA Purpose of Disbursement	22314		С
JFC FUNDRAISING CONSULTING			
Candidate Name		Category/ Type	Transaction ID: SB21B.I3959 Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:		31130.01
	Primary General		
State: President  District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial) C.			Date of Disbursement
<b>.</b>			M M / D D / Y Y Y Y
Mailing Address			, , , , , , , , , , , , , , , , , , , ,
City	State Zip Code		FEC Identification Number
Purpose of Disbursement			C
Candidate Name  Category Type			Amount of Each Disbursement this Period
Office Sought: Disbursement For:			
	Primary General		
	Other (specify) ▼		Memo Item
State: District:			
SUBTOTAL of Disbursements This Page (optional)			34205.79
TOTAL This Period (last page this line number only).			63702.59

SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 52 OF 54
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	I —	X 22 23 26 27
		28a	28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Lisa McClain Leadership Fund			
Full Name (Last, First, Middle Initial)			
A. LISA MCCLAIN FOR CONGRESS			Date of Disbursement
Mailing Address P.O. BOX 327			06 30 2025
	State Zip Code		FEC Identification Number
ROMEO	MI 48065		
Purpose of Disbursement			C C00726042
TRANSFER OF NET JFC FUNDS			Transaction ID : SB22.I4098
Candidate Name		Category/	Amount of Each Disbursement this Period
MCCLAIN, LISA, , ,		Туре	162265.23
	nent For: 2026		102203.23
	Primary General Other (specify) ▼		п., .
State: MI District: 09	culci (opcolly) •		Memo Item
Full Name (Last, First, Middle Initial)			
B. LISA MCCLAIN FOR CONGRESS			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. BOX 327			06 30 2025
,	State Zip Code		FEC Identification Number
ROMEO Purpose of Disbursement	MI 48065		
TRANSFER OF NET JFC FUNDS			C C00726042
Candidate Name			Transaction ID : SB22.I4099
MCCLAIN, LISA, , ,		Category/	Amount of Each Disbursement this Period
	nent For: 2026	Туре	56729.20
	Primary General		7 7 7
	Other (specify)		
State: MI District: 09	(-		Memo Item
Full Name (Last, First, Middle Initial)			
<sup>C.</sup> LASTING INVESTMENTS STREN	GTHENING AMERIC	CA PAC	Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO BOX 327			06 30 2025
City	State Zip Code		FFC Identification Number
ROMEO	MI 48065		FEC Identification Number
Purpose of Disbursement			C C00764886
TRANSFER OF NET JFC FUNDS			Transaction ID : SB22.I4100
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	Туре	17525.82
	Primary General		4 4
	Other (specify) ▼		T was to
State: District:	VI - 37 - <del>V</del>		Memo Item
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SUBTOTAL of Disbursements This Page (optional)		······	236520.25
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	EMIZED DISBURSEMENTS	for each of	rate schedule(s) category of the Summary Page	FOR LINE N (check only 21b 28a	-
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam				
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Lisa McClain Leadership Fund		, ,		
Α.	Full Name (Last, First, Middle Initial)  NRCC  Mailing Address 320 FIRST STREET SE				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	WASHINGTON Purpose of Disbursement TRANSFER OF NET JFC FUNDS Candidate Name  Office Sought: House Disbursen	State DC  ment For: Primary	Zip Code 20003	Category/ Type	FEC Identification Number  C C00075820  Transaction ID : SB22.I4101  Amount of Each Disbursement this Period  102948.17
	State: President District:	Other (spec	sify) ▼		Memo Item
В.	Full Name (Last, First, Middle Initial)  NRCC  Mailing Address 320 FIRST STREET SE				Date of Disbursement  M M M / D D / Y D Y D Y D Y D Y D Y D Y D Y D
	WASHINGTON Purpose of Disbursement TRANSFER OF NET JFC FUNDS-LEGAL Candidate Name	State DC	Zip Code 20003	Category/ Type	FEC Identification Number  C C00075820  Transaction ID : SB22.I4102  Amount of Each Disbursement this Period
		nent For: Primary Other (spec	General dify)		108552.09  Memo Item
C.	Full Name (Last, First, Middle Initial)  NRCC  Mailing Address 320 FIRST STREET SE				Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code WASHINGTON DC 20003  Purpose of Disbursement TRANSFER OF NET JFC FUNDS-BUILDING  Candidate Name  Category/ Type  Office Sought: House Disbursement For:				FEC Identification Number  C C00075820  Transaction ID : SB22.I4103  Amount of Each Disbursement this Period  13141.90	
		Primary Other (spec	General ify) ▼		Memo Item
s	SUBTOTAL of Disbursements This Page (optional)			·····	224642.16
т	OTAL This Period (last page this line number only)	)		<b>&gt;</b>	461162.41

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  ANAME OF COMMITTEE (in Full)  Lisa McClain Leadership Fund  Full Name (Last, First, Middle Initial)  GAZITUA LETELIER PA  Mailing Address 150 ALHAMBRA CIR STE 710  City CORAL CABLES  FL 33134  Purpose of Disbursement  REFUND  Candidate Name  City BOYNTON BEACH  FUND Set of Disbursement  REFUND  Cardidates Name  City BOYNTON BEACH  Fund Name (Last, First, Middle Initial)  Amailing Address  City BOYNTON BEACH  Fund Name  Castegory  Type  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  REFUND  Category  Type  Category  Type  Category  Type  Category  Type  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  REFUND  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  REFUND  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  REFUND  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  REFUND  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  REFUND  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Each Disbursement this Period  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Each Disbursement  Category  Transaction ID : \$828A13782  Amount of Ea	TEMIZED DISBURSEMENTS	for each category of the	e 21b	22 23 26 27
not not commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  Lisa McClain Leadership Fund  Full Name (Last, First, Middle Initial)  GAZITUA LETELIER PA  Mailing Address 150 LLHAMBRA CIR  STE 710  City  Category'  Full Name (Last, First, Middle Initial)  Candidate Name  Disbursement For:  Senate  Prinsign General  P	Any information copied from such Reports and Statem	lents may not be sold or		
Full Name (Last, First, Middle Initial)  GAZITUA LETELIER PA  Mailing Address 150 ALHAMBRA CIR STE 710 City State   Senate   Primary   General	or for commercial purposes, other than using the name			
Full Name (Last, First, Middle Initial)  GAZITUA LETELIER PA  Mailing Address 150 ALHAMBRA CIR STE 710  City CORAL GABLES President State: District: Distric				
A Mailing Address 150 ALHAMBRA CIR STE 710  City CORAL GABLES Purpose of Disbursement REFUND Candidate Name Corrected Boy Name	<u>'</u>			
Mailing Address  STE 710  City State Zip Code FL 33134  Purpose of Disbursement REFUND  Category/ Type  Office Sought: House Disbursement For: Senate President State: Disbursement For: Senate President Disbursement For: Senat	Λ			Date of Dishursement
Mailing Address 150 ALHAMBRA CIR STE 710  City CORAL GABLES	GAZITUA LETELIER PA	GAZITUA LETELIER PA		
CORAL GABLES Purpose of Disbursement REFUND Candidate Name  Office Sought:	STE 710			1 1 1 1 1 1 1
Purpose of Disbursement REFUND Candidate Name Office Sought: House Senate Primary General District: District: Pull Name (Last, First, Middle Initial) State: Disbursement REFUND Candidate Name Office Sought: House Primary General Disbursement Primary General Other (specify) ▼  Date of Disbursement REFUND Candidate Name  Office Sought: House Primary General Disbursement For: Senate Primary General Office Sought: House Primary General Office Sought: President State Zip Code President Other (specify)  Mailing Address City Senate Primary General Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Substotal of Disbursements This Page (optional)	,			FEC Identification Number
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Category/ Type  Office Sought: House Senate President State: Disbursement For: General President State: District: District: District: Pull Name (Last, First, Middle Initial)  RDG DEVELOPMENT GROUP LLC  Mailing Address 11072 BRANDYWINE LAKE WAY  City BOYNTON BEACH FL 33473  Purpose of Disbursement REFUND  Candidate Name  Office Sought: House Disbursement For: Senate Primary General President District: D	•			
Office Sought: House Primary General Primary G	Candidate Name		Category/	
Senate President Other (specify)  State: District:  Full Name (Last, First, Middle Initial)  RDG DEVELOPMENT GROUP LLC  Mailing Address 11072 BRANDYWINE LAKE WAY  City BOYNTON BEACH FL 33473  Category/ Type  Office Sought: House Disbursement For: Senate President District:  Full Name (Last, First, Middle Initial)  Mailing Address  City Senate Primary General Disbursement this Period Office Sought: House Disbursement For: Senate Primary General Disbursement  Candidate Name  Category/ Type  Date of Disbursement this Period Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement For: Senate Disbursement Disburse				
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Full Name (Last, First, Middle Initial)  RDG DEVELOPMENT GROUP LLC  Mailing Address 11072 BRANDYWINE LAKE WAY  City BOYNTON BEACH Purpose of Disbursement REFUND Candidate Name  Office Sought:  Full Name (Last, First, Middle Initial)  Purpose of Disbursement REFUND Senate President Category/ Type  Disbursement For: Senate Primary General Other (specify)  Date of Disbursement his Period  Date of Disbursement  FEC Identification Number  Category/ Type  Date of Disbursement this Period  Date of Disbursement this Period  Amount of Each Disbursement  FEC Identification Number  Category/ Type  Date of Disbursement  FEC Identification Number  Category/ Type  Date of Disbursement  Mailing Address  City State  Disbursement  FEC Identification Number  Category/ Type  Office Sought:  House Senate Primary General Other (specify)  Memo Item  Subtrotal of Disbursement this Period  Memo Item		Other (specify) ▼		Memo Item
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City BOYNTON BEACH Purpose of Disbursement REFUND Candidate Name  Office Sought: House   Disbursement   Primary   General   City   State   Zip Code   Purpose of Disbursement For:   State: District:   Date of Disbursement   Candidate Name   Category/ Type    City   State   Zip Code   Purpose of Disbursement   Candidate Name   Category/ Type    Category	TOG DEVELOPMENT GROUP LL	<u> </u>		M = M / D = D / Y = Y = Y
BOYNTON BEACH Purpose of Disbursement REFUND Candidate Name  Office Sought: House		Mailing Address 11072 BRANDYWINE LAKE WAY		
Purpose of Disbursement REFUND Candidate Name  Category/ Type  Office Sought: House Senate Primary General District:  Full Name (Last, First, Middle Initial)  City State Zip Code Purpose of Disbursement  Candidate Name  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Amount of Each Disbursement this Period  Memo Item	-			FEC Identification Number
REFUND Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  Full Name (Last, First, Middle Initial)  Category/ Type  Memo Item  Transaction ID : SB28A.I3782  Amount of Each Disbursement this Period  Memo Item  Date of Disbursement  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Office Sought: House Senate Primary General Other (specify)   Category/ Type  Category/ Type  Memo Item  State: District:  Substortal of Disbursements This Page (optional)	DO THE OTE DE TOTAL	334/3		
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Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President  State: District:  Substrate Other (specify)   Substrate Substrate Substrate Other (specify)   Substrate	Mailing Address			M = M / D = D / Y = Y = Y
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Office Sought: House Disbursement For: Senate Primary General President Other (specify)   State: District:  Substruct  Substruct  Memo Item	Candidate Name			Amount of Each Disbursement this Period
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