

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

1 2 F E 4 M 5

CLIFF BENTZ FOR CONGRESS

ADDRESS (number and street)

660 MORGAN AVE



Check if different than previously reported. (ACC)

ONTARIO

OR

97914-8652

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00725465

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

OR

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2025

through

M M / D D / Y Y Y Y

03 / 31 / 2025

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

Type or Print Name of Treasurer LISKER, LISA, , MS.,

Signature of Treasurer

LISKER, LISA, , MS.,

Date

M M / D D / Y Y Y Y

04 / 15 / 2025

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

CLIFF BENTZ FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2025

To:

MM / DD / YYYY
03 / 31 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	100681.69	106367.99
(b) Total Contribution Refunds (from Line 20(d))	0.00	5000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	100681.69	101367.99
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	54231.68	112919.39
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	54231.68	112919.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1039694.81	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

CLIFF BENTZ FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2025

To:

MM / DD / YYYY
03 / 31 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

25300.00

29050.00

(ii) Unitemized

340.01

626.31

(iii) TOTAL of contributions
from individuals ▶

25640.01

29676.31

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

75041.68

76691.68

(d) The Candidate

0.00

0.00

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

100681.69

106367.99

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

100681.69

106367.99

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	54231.68	112919.39
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	48100.00	48100.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	48100.00	48100.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5000.00
21. OTHER DISBURSEMENTS	15000.00	15000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	117331.68	181019.39

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1056344.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	100681.69
25. SUBTOTAL (add Line 23 and Line 24).....	1157026.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	117331.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1039694.81

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

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

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)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALBERT, THOMAS, L., MR.,

A. Mailing Address 18400 GARDENIA WAY

City

GAITHERSBURG

State

MD

Zip Code

20879-4641

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZOOLOGICAL ASSN.Occupation
GOVERNMENT AFFAIRS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		13		2025

Transaction ID : AE9762718443D4B138BC

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BAIRD, SHAWN, , ,

B. Mailing Address 5819 SW 45TH AVE

City

PORTLAND

State

OR

Zip Code

97221-3478

FEC ID number of contributing
federal political committee.

C

Name of Employer
METRO WEST AMBULANCEOccupation
VP

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		12		2025

Transaction ID : A3E73BDD84768421A998

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BEAUDREAU, DAVID, G., ,

C. Mailing Address 1518 LAUREL HILL RD

City

VIENNA

State

VA

Zip Code

22182-1714

FEC ID number of contributing
federal political committee.

C

Name of Employer
DCLRSOccupation
GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		13		2025

Transaction ID : A3D32C3C0DE93410080C

Amount of Each Receipt this Period

250.00

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

4250.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

BUCHER, RAY, , MR.,

A.

Mailing Address 632 5TH ST NE

City

WASHINGTON

State

DC

Zip Code

20002-5202

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACCELERATE STRATEGIES

Occupation

CONSULTANT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2025D D / Y Y Y Y Y
24 / 2025Y Y Y Y Y
2025

Transaction ID : AE298DD9EA54E4C06B4B

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BYRNE, GREGORY, G., MR.,

B.

Mailing Address 2301 NW 6TH ST.

City

BEND

State

OR

Zip Code

97703-1189

FEC ID number of contributing
federal political committee.

C

Name of Employer

LONE ROCK RESOURCES

Occupation

COO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : A3587E261F98F4FCF9FA

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GARRETT, KIRBY, , MR.,

C.

Mailing Address 5685 PEBBLESTONE COURT

City

CARMEL

State

IN

Zip Code

46033

FEC ID number of contributing
federal political committee.

C

Name of Employer

CFM ADVOCATES

Occupation

GOVERNMENT AFFAIRS

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : AAF94A794376D48AD92E

Amount of Each Receipt this Period

500.00

☐ Memo Item

1750.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

GRIFFIN, PAUL, , ,

A.

Mailing Address 1435 LANDER LN

City

LAFAYETTE

State

CO

Zip Code

80026-8028

FEC ID number of contributing
federal political committee.

C

Name of Employer

PIONEER STRATEGIES

Occupation

OWNER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 19 2025

Transaction ID : A5BB580370AEF43078BE

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

LUTHER, TOBY, ALLEN, MR.,

Mailing Address 2700 MELROSE RD

City

ROSEBURG

State

OR

Zip Code

97471-8903

FEC ID number of contributing
federal political committee.

C

Name of Employer

LONE ROCK TIMBER

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID : AC106C00AA1004501A96

Amount of Each Receipt this Period

750.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

MALOTT LIVESTOCK, LLC

Mailing Address PO BOX 127

City

POWELL BUTTE

State

OR

Zip Code

97753-0127

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 18 2025

Transaction ID : AC7A150A47F614452B30

Amount of Each Receipt this Period

750.00

☐ Memo Item

SEE PARTNER MEMOS

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

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

MALOTT, MARK, WALLACE, MR.,

A. Mailing Address PO BOX 127

City
POWELL BUTTE

State
OR

Zip Code
97753-0127

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRAL OREGON RANCH SUPPLY

Occupation
OWNER - RANCHER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1092.15

Date of Receipt

M M / D D / Y Y Y Y Y
03 18 2025

Transaction ID : ADEB7B097C5B7402C8F5

Amount of Each Receipt this Period

342.15

☒ Memo Item

MALOTT LIVESTOCK PARTNER MEMO

PARTNERSHIP: MALOTT LIVESTOCK, LLC

Full Name (Last, First, Middle Initial)

MALOTT, ANN, M., MRS.,

B. Mailing Address PO BOX 127

City
POWELL BUTTE

State
OR

Zip Code
97753-0127

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
RANCHER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1092.15

Date of Receipt

M M / D D / Y Y Y Y Y
03 18 2025

Transaction ID : AFD86EC50BEEF4FBDB33

Amount of Each Receipt this Period

342.15

☒ Memo Item

MALOTT LIVESTOCK PARTNER MEMO

PARTNERSHIP: MALOTT LIVESTOCK, LLC

Full Name (Last, First, Middle Initial)

MALOTT, KAHL, , ,

C. Mailing Address PO BOX 68

City
POWELL BUTTE

State
OR

Zip Code
97753

FEC ID number of contributing
federal political committee.

C

Name of Employer
MALOTT LIVESTOCK, LLC

Occupation
RANCHER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

782.85

Date of Receipt

M M / D D / Y Y Y Y Y
03 18 2025

Transaction ID : AE576F73B2D1C4F09920

Amount of Each Receipt this Period

32.85

☒ Memo Item

MALOTT LIVESTOCK PARTNER MEMO

PARTNERSHIP: MALOTT LIVESTOCK, LLC

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

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

MALOTT, ANN, M., MRS.,

A. Mailing Address PO BOX 127

City

POWELL BUTTE

State

OR

Zip Code

97753-0127

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RANCHER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 18 2025

18 2025

2025

Transaction ID : A87EEDE16A4E44193B21

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MALOTT, KAHL, , ,

B. Mailing Address PO BOX 68

City

POWELL BUTTE

State

OR

Zip Code

97753

FEC ID number of contributing
federal political committee.

C

Name of Employer

MALOTT LIVESTOCK, LLC

Occupation

RANCHER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 18 2025

18 2025

2025

Transaction ID : AC99F84DB20114531A56

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MALOTT, MARK, WALLACE, MR.,

C. Mailing Address PO BOX 127

City

POWELL BUTTE

State

OR

Zip Code

97753-0127

FEC ID number of contributing
federal political committee.

C

Name of Employer

CENTRAL OREGON RANCH SUPPLY

Occupation

OWNER - RANCHER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 18 2025

18 2025

2025

Transaction ID : A4EF4C0A0DEB74B3BAF7

Amount of Each Receipt this Period

750.00

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

2250.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARSHALL, MEGAN, , ,

A.

Mailing Address 126 QUEEN ST

City

ALEXANDRIA

State

VA

Zip Code

22314-2611

FEC ID number of contributing
federal political committee.

C

Name of Employer
PARTNEROccupation
NATHANSON & HAUCK

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 11 / 2025

Transaction ID : A201F0AD9023C4B73B13

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCCANN, TED, , ,

B.

Mailing Address 6204 INWOOD ST

City

CHEVERLY

State

MD

Zip Code

20785-3110

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARTICLE ONE GROUPOccupation
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 24 / 2025

Transaction ID : AA48E954DE21045D188A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORONGO BAND OF MISSION INDIANS

C.

Mailing Address 12700 PUMARRA RD

City

BANNING

State

CA

Zip Code

92220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025

Transaction ID : A3DBE5C7E490F4C139FA

Amount of Each Receipt this Period

2000.00

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

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

MYLANDER, KIRK, WAYNE, MR.,

A. Mailing Address 23180 GREENGATE PLCity
SHERWOODState
ORZip Code
97140-6307FEC ID number of contributing
federal political committee.

C

Name of Employer
CISOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 15 2025

Transaction ID : A38B54B23DD8C43F687C

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MYLANDER, KIRK, WAYNE, MR.,

B. Mailing Address 23180 GREENGATE PLCity
SHERWOODState
ORZip Code
97140-6307FEC ID number of contributing
federal political committee.

C

Name of Employer
CISOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 15 2025

Transaction ID : A2146D70150D545CA8AC

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MYLANDER, KIRK, WAYNE, MR.,

C. Mailing Address 23180 GREENGATE PLCity
SHERWOODState
ORZip Code
97140-6307FEC ID number of contributing
federal political committee.

C

Name of Employer
CISOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 15 2025

Transaction ID : A9BDA50EC82D649869D7

Amount of Each Receipt this Period

100.00

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

300.00

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

O'HARE, ANDREW, T., ,

A. Mailing Address 8002 KENTBURY DR.City
BETHESDAState
MDZip Code
20814FEC ID number of contributing
federal political committee.

C

Name of Employer
COMPOSITE PANEL ASSOC.Occupation
GOVERNMENT RELATIONS

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 13 2025

Transaction ID : AF312DDB2182249A7986

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SADLER, PHILIP, A., MR.,

B. Mailing Address PO BOX 1298City
JACKSONVILLEState
ORZip Code
97530-1298FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 18 2025

Transaction ID : AAA185CBD90534C42A75

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SAWYER, CYNTHIA, , ,

C. Mailing Address 8165 SW RIDGEWAY DRCity
PORTLANDState
ORZip Code
97225-3043FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 10 2025

Transaction ID : AD19279DFF0ED41439EE

Amount of Each Receipt this Period

1000.00

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

2250.00

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

SCOTT, GERALD, ALAN, MR.,

A. Mailing Address 3390 S LAMBERT STCity
EUGENEState
ORZip Code
97405-5517FEC ID number of contributing
federal political committee.

C

Name of Employer
ELMERS GROUPOccupation
MANAGER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 28 2025

Transaction ID : A622EB1EA11514234913

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE TULALIP TRIBES OF WASHINGTON

B. Mailing Address 6406 MARINE DRCity
TULALIPState
WAZip Code
98271-9775FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A9256F161BB1B4CC5BDD

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHELOCK, GINA, M., MRS.,

C. Mailing Address PO BOX 1917City
JACKSONVILLEState
ORZip Code
97530-1917FEC ID number of contributing
federal political committee.

C

Name of Employer
GRAYBACK FORESTRYOccupation
OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

Transaction ID : A947A67CB4262438DA46

Amount of Each Receipt this Period

3000.00

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

8500.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

ZUPAN, DEVIN, M., MR.,

A.

Mailing Address 1071 CASTLEWOOD DR.

City

MEDFORD

State

OR

Zip Code

97504-3676

FEC ID number of contributing
federal political committee.

C

Name of Employer

WINDERMERE VAN VLEET AND ASSOCIATE

Occupation

BROKER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A1D0CDA44009E4078965

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

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

500.00

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

25300.00

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALASKA AIR GROUP PAC

Mailing Address PO BOX 68900

City
SEATTLEState
WAZip Code
98168FEC ID number of contributing
federal political committee.

C C00024349

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A41DC7D3A12F04CCB809

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF FAMILY PHYSICIANS PAC (FAMMEDPAC)

Mailing Address 1133 CONNECTICUT AVE NW
STE 1100City
WASHINGTONState
DCZip Code
20036-4342FEC ID number of contributing
federal political committee.

C C00411553

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A65B65434EE084920A0D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN AMBULANCE ASSOCIATION AMBUPAC

Mailing Address 8400 WESTPARK DR, 2ND FLOOR

City
MCLEANState
VAZip Code
22102FEC ID number of contributing
federal political committee.

C C00168070

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 17 2025

Transaction ID : A3AEC9C82E7E44AB9964

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 800 TENTH ST NW

TWO CITY CENTER, STE 400

City

WASHINGTON

State

DC

Zip Code

20001

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

C00106146

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025D D / Y Y Y Y Y
31 / 2025Y Y Y Y Y
2025

Transaction ID : A9868629226C240A9B8B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN OPTOMETRIC ASSOCIATION PAC

Mailing Address 1505 PRINCE ST

STE 300

City

ALEXANDRIA

State

VA

Zip Code

22314-2874

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

C00024968

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025D D / Y Y Y Y Y
31 / 2025Y Y Y Y Y
2025

Transaction ID : ABCAA1EDED9B947169FB

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN PHYSICAL THERAPY ASSOCIATION PAC

Mailing Address 1111 N FAIRFAX ST

City

ALEXANDRIA

State

VA

Zip Code

22314

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

C00012880

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2025D D / Y Y Y Y Y
31 / 2025Y Y Y Y Y
2025

Transaction ID : A759F706B097543DF9B3

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICA'S ELECTRIC COOPERATIVES PAC

Mailing Address 4301 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22203

FEC ID number of contributing
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A8371EF508CDF4607AD8

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICA'S ELECTRIC COOPERATIVES PAC

Mailing Address 4301 WILSON BLVD

City
ARLINGTON

State
VA

Zip Code
22203

FEC ID number of contributing
federal political committee.

C C00002972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : ADFF9DD5FBAE54860981

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AUTO CARE ASSOCIATION PAC

Mailing Address 7101 WISCONSIN AVE.
STE. 1300

City
BETHESDA

State
MD

Zip Code
20814

FEC ID number of contributing
federal political committee.

C C00250753

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 10 2025

Transaction ID : AFBBD1A464F1F459ABC5

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

5500.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC**A.**

Mailing Address 750 9TH ST NW

City

WASHINGTON

State

DC

Zip Code

20001-4524

FEC ID number of contributing
federal political committee.**C** C00194746

Name of Employer

Occupation

Receipt For: 2026

☐ Primary
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : ACCDE07852C5F4DC7968

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

BLUEPAC - BLUE CROSS BLUE SHIELD ASSOCIATION PAC

Mailing Address 750 9TH ST NW

City

WASHINGTON

State

DC

Zip Code

20001-4524

FEC ID number of contributing
federal political committee.**C** C00194746

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : A2F92B33F748347E3996

Amount of Each Receipt this Period

3000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

CALPORTLAND CO PAC

Mailing Address 20025 E FINANCIAL WAY

City

GLENDDORA

State

CA

Zip Code

91741

FEC ID number of contributing
federal political committee.**C** C00389429

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : AC4D18549A3044861B65

Amount of Each Receipt this Period

5000.00

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

10000.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

CAMBIA HEALTH SOLUTIONS PAC

A.

Mailing Address 100 SW MARKET ST, M/S: E15A

City

PORTLAND

State

OR

Zip Code

97201

FEC ID number of contributing
federal political committee.

C C00252684

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

17

2025

Transaction ID : A6B61E5FAB774411F8D8

Amount of Each Receipt this Period

2500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

CAMBIA HEALTH SOLUTIONS PAC

Mailing Address 100 SW MARKET ST, M/S: E15A

City

PORTLAND

State

OR

Zip Code

97201

FEC ID number of contributing
federal political committee.

C C00252684

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

17

2025

Transaction ID : A8C36BEE93AA14160901

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

COLLEGE OF AMERICAN PATHOLOGISTS PAC

Mailing Address 1001 G ST NW
STE 425

City

WASHINGTON

State

DC

Zip Code

20001-4545

FEC ID number of contributing
federal political committee.

C C00274944

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 17 2025

17

2025

Transaction ID : AA82263EAE15E4A25AFF

Amount of Each Receipt this Period

1000.00

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

6000.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

COMCAST NBC UNIVERSAL PAC

Mailing Address ONE COMCAST CENTER
1701 JFK BLVDCity
PHILADELPHIAState
PAZip Code
19103FEC ID number of contributing
federal political committee.

C C00248716

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : AA86CEC4531AF419A9F7

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CONSTELLATION ENERGY CORPORATION EMPLOYEE PAC (CEPAC)

Mailing Address 250 MASSACHUSETTS AVE NW
STE 760City
WASHINGTONState
DCZip Code
20001-5823FEC ID number of contributing
federal political committee.

C C00793711

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A79088196B15A4D23987

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELEVANCE HEALTH, INC. PAC (ELEVANCE HEALTH PAC)

Mailing Address 1001 PENNSYLVANIA AVE NW
STE 710City
WASHINGTONState
DCZip Code
20004-2513FEC ID number of contributing
federal political committee.

C C00197228

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A6C9E7AE4F0E64626B48

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

5000.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

ENERGY MARKETERS OF AMERICA SMALL BUSINESS CMTE PAC**A.**Mailing Address 1901 FORT MYER DR
STE 500City
ARLINGTONState
VAZip Code
22209-1609FEC ID number of contributing
federal political committee.**C** C00035204

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		17		2025

Transaction ID : A733A665A413249D083F

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ERNST & YOUNG PAC**B.**

Mailing Address 1101 NEW YORK AVE, NW

City
WASHINGTONState
DCZip Code
20005FEC ID number of contributing
federal political committee.**C** C00227744

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : ABBEEFC22C6645289E6

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GUIDEWELL MUTUAL HOLDING CORPORATION PAC (GUIDEWELL PAC)**C.**Mailing Address 4800 DEERWOOD CAMPUS PKWY
DC1-7City
JACKSONVILLEState
FLZip Code
32246-8317FEC ID number of contributing
federal political committee.**C** C00161141

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		20		2025

Transaction ID : A6B378961D4DC4AD98AD

Amount of Each Receipt this Period

1000.00

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

5000.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

HEALTH CARE SERVICE CORPORATION EMPLOYEES' PAC**A.**Mailing Address 300 E RANDOLPH ST
LEGAL DEPARTMENTCity
CHICAGOState
ILZip Code
60601-5014FEC ID number of contributing
federal political committee.**C** C00199711

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025**Transaction ID : A8506CAC3039548AFB0A**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HIGHMARK PAC OF HIGHMARK INC.**B.**

Mailing Address 1800 CENTER ST

City
CAMP HILLState
PAZip Code
17011-1741FEC ID number of contributing
federal political committee.**C** C00302844

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 18 2025**Transaction ID : AA18567B0009E4974842**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INDEPENDENCE BLUE CROSS LLC PAC**C.**

Mailing Address 1901 MARKET ST

City
PHILADELPHIAState
PAZip Code
19103-1480FEC ID number of contributing
federal political committee.**C** C00450056

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 13 2025**Transaction ID : A36D856E0EAF141348F9**

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

INSURPAC

A.

Mailing Address 20 F ST NW, STE 610

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.**C** C00022343

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A5508F6A81B28454A9DD

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

LABORATORY CORPORATION OF AMERICA HOLDINGS POLITICAL PARTICIPATION COMMITTEE

Mailing Address 358 S MAIN ST

FL 5

City

BURLINGTON

State

NC

Zip Code

27215-5837

FEC ID number of contributing
federal political committee.**C** C00314997

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : A4B9CF62CCE8F404E9FC

Amount of Each Receipt this Period

2000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

LKQ CORPORATION EMPLOYEE GGF

Mailing Address 100 M ST SE

STE 750

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.**C** C00458158

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : AC2DE95E9835A4950908

Amount of Each Receipt this Period

2000.00

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

5000.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

LORI CHAVEZ-DEREMER FOR CONGRESS**A.**Mailing Address 13203 SE 172ND AVE
STE 166City
HAPPY VALLEYState
ORZip Code
97086-8738FEC ID number of contributing
federal political committee.**C** C00784520

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

541.68

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		25		2025

Transaction ID : ADB5BDD2B04974395A37

Amount of Each Receipt this Period

541.68

☐ Memo Item

IN-KIND:LIST RENTAL

B.

Full Name (Last, First, Middle Initial)

MN8 ENERGY LLC PAC (MN8 PAC)Mailing Address 1155 AVENUE OF THE AMERICAS
FL 27City
NEW YORKState
NYZip Code
10036-2720FEC ID number of contributing
federal political committee.**C** C00865378

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		13		2025

Transaction ID : A991A016AED824FE9A93

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

NACSPAC

Mailing Address 1600 DUKE STREET

City
ALEXANDRIAState
VAZip Code
22314FEC ID number of contributing
federal political committee.**C** C00126763

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		31		2025

Transaction ID : AFD0E4D0AE83E4020A23

Amount of Each Receipt this Period

2500.00

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

5541.68

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

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

PAGE 25 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL CATTLEMEN'S BEEF ASSOCIATION PAC**A.**Mailing Address 1275 PENNSYLVANIA AVE NW
STE 801

City

WASHINGTON

State

DC

Zip Code

20004

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

C00028787

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 13 2025

Transaction ID : AC326E7E421494A32960

Amount of Each Receipt this Period

5000.00



Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC**B.**

Mailing Address 100 DAINGERFIELD RD

City

ALEXANDRIA

State

VA

Zip Code

22314-3391

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

C00030809

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 18 2025

Transaction ID : A16BB7C98D6734DD9982

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

NORTHWEST NATURAL GAS PAC**C.**

Mailing Address PO BOX 42307

City

PORTLAND

State

OR

Zip Code

97242

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

C00174367

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 30 2025

Transaction ID : AC8069FCD60E54E7C87F

Amount of Each Receipt this Period

1500.00



Memo Item

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

7500.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

RAPTOR PAC

A.

Mailing Address PO BOX 4864

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	2	5

Transaction ID : A44D5D495DE8C492CA34

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REALTORS PAC

B.

Mailing Address 430 N MICHIGAN AVE

City
CHICAGOState
ILZip Code
60611-4011FEC ID number of contributing
federal political committee.**C** C00030718

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	2	5

Transaction ID : AC980D88027A043C09B7

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REPUBLICAN MAINSTREET PARTNERSHIP PAC

C.Mailing Address 410 FIRST ST SE
STE 200City
WASHINGTONState
DCZip Code
20003FEC ID number of contributing
federal political committee.**C** C00165159

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A756624C57BFC44F3848

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

5500.00

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1501.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 07 2025

Transaction ID : A5C68BDDCC5B4482591A

Amount of Each Receipt this Period

1000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

REPUBLICAN MAINSTREET PARTNERSHIP PACMailing Address 410 FIRST ST SE
STE 200City
WASHINGTONState
DCZip Code
20003FEC ID number of contributing
federal political committee.

C C00165159

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 13 2025

Transaction ID : AF6CFEF2D119C480DA07

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THREE RIVERS PAC

Mailing Address PO BOX 42307

City
PORTLANDState
ORZip Code
97242FEC ID number of contributing
federal political committee.

C C00473116

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : ACA6D6CCEC97C464E95E

Amount of Each Receipt this Period

500.00

☐ Memo Item

1500.00

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

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

PAGE 28 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESSFull Name (Last, First, Middle Initial)
VILLAGEMD PAC

Mailing Address 1 DIAMOND HILL RD

City
BERKELEY HEIGHTSState
NJZip Code
07922-2104FEC ID number of contributing
federal political committee.

C C00743344

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A2A27074ACE43413F8DC

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
WALDEN FOR CONGRESS

Mailing Address PO BOX 1091

City
HOOD RIVERState
ORZip Code
97031FEC ID number of contributing
federal political committee.

C C00333427

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A54A442CCB4334FAEBB2

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)
WALDEN FOR CONGRESS

Mailing Address PO BOX 1091

City
HOOD RIVERState
ORZip Code
97031FEC ID number of contributing
federal political committee.

C C00333427

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 31 2025

Transaction ID : A20D29921EBD14847BF6

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

WEYERHAEUSER COMPANY PAC

A. Mailing Address 220 OCCIDENTAL AVE S.

City
SEATTLE

State
WA

Zip Code
98104

FEC ID number of contributing
federal political committee.

C C00007948

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2025

Transaction ID : A8A2C9923F6CC48E0BCE

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WOOLPERT, INC POLITICAL ACTION COMMITTEE

B. Mailing Address 4454 IDEA CENTER BLVD

City
DAYTON

State
OH

Zip Code
45430

FEC ID number of contributing
federal political committee.

C C00479899

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID : A61CEB879262C43D6973

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

6000.00

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

75041.68

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOT, INC.

Mailing Address 1340 POYDRAS ST, #1770

City
NEW ORLEANSState
LAZip Code
70112Purpose of Disbursement
CREDIT CARD PROCESSING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

490.70

Transaction ID : B1033EC6F22B5482EBB3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ARIAT

Mailing Address 1500 ALVARADO ST

City
SAN LEANDROState
CAZip Code
94577-2630Purpose of Disbursement
CAMPAIGN DONOR GIFTS

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

203.90

Transaction ID : BF56D2B21B7E94F7DB64

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
EVENT CATERING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

713.88

Transaction ID : BDBBAE147A2364D55A4E

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

1408.48

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

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

PAGE 31 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
EVENT CATERING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

407.06

Transaction ID : B8A6ED7457CFF4570A5E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
EVENT CATERING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1465.27

Transaction ID : B6281B6B5ED3A4137AC4

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONGRESSIONAL INSTITUTE

Mailing Address 1700 DIAGONAL RD, #300

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2318.98

Transaction ID : B62FA9DDAF133425A94B

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

4191.31

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

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

PAGE 32 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GRAND VALLEY CONSULTING LLC

Mailing Address 1931 BEAVER LN

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

11400.00

Transaction ID : B1263EC6DFC7B41C5880

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GRAND VALLEY CONSULTING LLC

Mailing Address 1931 BEAVER LN

City
MCLEANState
VAZip Code
22101Purpose of Disbursement
FUNDRAISING CONSULTING/EVENT CATERING/POSTAGE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5891.92

Transaction ID : B94AB2638D8A5495B8B3

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. HADLEY LLC

Mailing Address 44356 MACOMB ST NW

City
WASHINGTONState
DCZip Code
20016Purpose of Disbursement
EVENT CATERING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

626.83

Transaction ID : B8F2120A8E9784C74B76

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

17918.75

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

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

PAGE 33 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HUCKABY DAVIS LISKER INC.

Mailing Address 228 S WASHINGTON ST. #115

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
COMPLIANCE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5492.62

Transaction ID : B7B931208CE9A485FBD9

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. IDENTITY ZONE

Mailing Address 43 NW CHERRY LANE, STE 105

City
MADRASState
ORZip Code
97741Purpose of Disbursement
CAMPAIGN DONOR GIFTS

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1250.52

Transaction ID : B102D42A5D74A4D3DB0D

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. IDENTITY ZONE

Mailing Address 43 NW CHERRY LANE, STE 105

City
MADRASState
ORZip Code
97741Purpose of Disbursement
CAMPAIGN DONOR GIFTS

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

408.21

Transaction ID : B9E602DD8ADC94B0EB7F

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

7151.35

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

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

PAGE 34 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LORI CHAVEZ-DEREMER FOR CONGRESSMailing Address 13203 SE 172ND AVE
STE 166City
HAPPY VALLEYState
ORZip Code
97086-8738Purpose of Disbursement
IN-KIND:LIST RENTAL

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

541.68

Transaction ID : BDB5BDD2B04974395A37

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARISA SANCHEZ

Mailing Address 575 LYNNETTE CIR

City
VISTAState
CAZip Code
92084-3724Purpose of Disbursement
ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B8801440C18BD47B5AF9

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARISA SANCHEZ

Mailing Address 575 LYNNETTE CIR

City
VISTAState
CAZip Code
92084-3724Purpose of Disbursement
ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : B4B559C4FCFE54463B02

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

2041.68

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

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

PAGE 35 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MARISA SANCHEZ

Mailing Address 575 LYNNETTE CIR

City
VISTAState
CAZip Code
92084-3724Purpose of Disbursement
ADMINISTRATIVE CONSULTING

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : BED2E1E1B3209463094D

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NICHOLAS STRADER

Mailing Address 65320 KIOWA DR

City
BENDState
ORZip Code
97703Purpose of Disbursement
EXPENSE REIMB- SEE MEMOS

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3559.84

Transaction ID : B7629E9BA5F4848A5926

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RARE

Mailing Address 1595 I ST NW

City
WASHINGTONState
DCZip Code
20005-1106Purpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

373.50

Transaction ID : BFF02946E31004A348B7

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

4309.84

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

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

PAGE 36 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RARE

Mailing Address 1595 I ST NW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2025

City
WASHINGTONState
DCZip Code
20005-1106

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

84.70

Transaction ID : B9401B2D25EE64739A45

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. THE CAPITAL GRILLE

Mailing Address 1861 INTERNATIONAL DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2025

City
MCLEANState
VAZip Code
22102

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

111.30

Transaction ID : BA816E521F21643C6911

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. THE SALT LINE

Mailing Address 79 POTOMAC AVE SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2025

City
WASHINGTONState
DCZip Code
20003-3848

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

209.29

Transaction ID : BC043F50E816F40F28A7

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

0.00

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

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

PAGE 37 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHIPPING CRATES

Mailing Address 12575 ULINE DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2025

City
PLEASANT PRAIRIEState
WIZip Code
53158-3686

FEC Identification Number

CPurpose of Disbursement
GIFT BOXES SHIPPING

001

Amount of Each Disbursement this Period

401.85

Transaction ID : BA818D49897624C1399F

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. THE CAPITAL GRILLE

Mailing Address 1861 INTERNATIONAL DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2025

City
MCLEANState
VAZip Code
22102

FEC Identification Number

CPurpose of Disbursement
EVENT CATERING

001

Amount of Each Disbursement this Period

426.40

Transaction ID : BE9FB83E51FD843ECAA4

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2025

City
WASHINGTONState
DCZip Code
20003

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Amount of Each Disbursement this Period

45.40

Transaction ID : BBF7490DD20104B77959

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

0.00

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

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

PAGE 38 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL CLUB

Mailing Address 300 FIRST ST SE

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20003

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

241.84

Transaction ID : BBF9654AD3370446F9FC

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. CIRCAMailing Address 99 M ST SE
STE 100

Date of Disbursement

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

City
WASHINGTONState
DCZip Code
20003-3957

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

207.02

Transaction ID : BBDA7B0A49DBA40758DF

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. FIVE FUSIONMailing Address 821 NW WALL ST
STE 100

Date of Disbursement

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

City
BENDState
ORZip Code
97703-2771

FEC Identification Number

CPurpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

217.00

Transaction ID : B01E467426D734DECA77

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

0.00

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

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

PAGE 39 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RYVALL LLC

Mailing Address 1391 PENNSYLVANIA AVE SE, M06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2025

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
WEB SERVICES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B1E3FB323240D46C6B0E

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RYVALL LLC

Mailing Address 1391 PENNSYLVANIA AVE SE, M06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2025

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
WEB SERVICES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B8472CD77295A400D8B3

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RYVALL LLC

Mailing Address 1391 PENNSYLVANIA AVE SE, M06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
WEB SERVICES

001

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B8932CDA0D479452D8A9

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

1500.00

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

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

PAGE 40 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. TERESA MCLEES

Mailing Address 4504 S. LAVA SPRINGS LOOP

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		14		2025

City
NAMPAState
IDZip Code
83686

FEC Identification Number

CPurpose of Disbursement
ADMINISTRATIVE CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

237.50

Transaction ID : B033D6950DA8C4B499EA

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. TG FUNDRAISING LLC

Mailing Address 3 CENTERPOINTE DRIVE, #410

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City
LAKE OSWEGOState
ORZip Code
97035

FEC Identification Number

CPurpose of Disbursement
FUNDRAISING CONSULTING

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

14000.00

Transaction ID : B864A1A3E550947E3B5F

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. VERIZON

Mailing Address PO BOX 15124

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2025

City
ALBANYState
NYZip Code
12212

FEC Identification Number

CPurpose of Disbursement
CELL PHONE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

402.87

Transaction ID : BE71AF7284AEA40C2B78

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

14640.37

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

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. VERIZON

Mailing Address PO BOX 15124

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2025

City
ALBANYState
NYZip Code
12212

FEC Identification Number

CPurpose of Disbursement
CELL PHONE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

402.87

Transaction ID : BE042A46F07FE4ACCB0F

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. VERIZON

Mailing Address PO BOX 15124

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		27		2025

City
ALBANYState
NYZip Code
12212

FEC Identification Number

CPurpose of Disbursement
CELL PHONE

001

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

403.35

Transaction ID : B03ED427A4F8B48EBA03

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

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

806.22

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

53968.00

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

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BENTZ, CLIFF, , MR.,

Mailing Address 660 MORGAN AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2025

City
ONTARIOState
ORZip Code
97914-8652

FEC Identification Number

C C00725465Purpose of Disbursement
LOAN REPAYMENT: LOAN RECEIVEDCandidate Name
BENTZ, CLIFF, , MR.,Category/
Type

Amount of Each Disbursement this Period

48100.00

Transaction ID : BF14856A95A954BE08BA

☐ Memo Item

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2024

☒ Primary ☐ General
☐ Other (specify) ▼

State: OR

District: 02

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

48100.00

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

48100.00

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

PAGE 43 OF 44

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

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NAME OF COMMITTEE (In Full)

CLIFF BENTZ FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SCHIMEL FOR JUSTICE

Mailing Address PO BOX 176

Date of Disbursement

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

City
WAUKESHAState
WIZip Code
53187-0176

FEC Identification Number

CPurpose of Disbursement
NONFEDERAL CONTRIBUTION

012

Category/
Type

Amount of Each Disbursement this Period

15000.00

Transaction ID : B430D64C1FC4C4A2FA6A

☐ Memo Item

Office Sought:

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

Disbursement For:

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

State:

District:

Full Name (Last, First, Middle Initial)

B. JACKSON COUNTY REPUBLICAN PARTY

Mailing Address 311 EAST MAIN STREET

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	2	5

City
MEDFORDState
ORZip Code
97501

FEC Identification Number

CPurpose of Disbursement
INKIND: CAMPAIGN MERCH AT FAIR MARKET VALUE

012

Category/
Type

Amount of Each Disbursement this Period

162.36

Transaction ID : B3CA909D2DB6E4114BB1

☒ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

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

Disbursement For:

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

State:

District:

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

15000.00

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

15000.00

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

PAGE 44 OF 44

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

NAME OF COMMITTEE (In Full)

Transaction ID : CBA1444B77A9B4D40A9D

CLIFF BENTZ FOR CONGRESS

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

Election: 2024

BENTZ, CLIFF, , MR.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

660 MORGAN AVE

City

ONTARIO

State

OR

ZIP Code

97914-8652

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.00

Cumulative Payment To Date

100000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 31 / 2019M M / D D / Y Y Y Y
NONE

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

0.00

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

0.00

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