



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**YOUNG VICTORY COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2026"/>	<input type="text"/>	<input type="text" value="21661.85"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="157434.12"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="155915.00"/>	<input type="text" value="893047.45"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="313349.12"/>	<input type="text" value="914709.30"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="29564.09"/>	<input type="text" value="630924.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="283785.03"/>	<input type="text" value="283785.03"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**YOUNG VICTORY COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	153300.00	870471.00
(ii) Unitemized .....	2615.00	12085.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	155915.00	882556.30
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	155915.00	892556.30
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	491.15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	155915.00	893047.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	155915.00	893047.45

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	29564.09	203486.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	29564.09	203486.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	395388.10
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	32050.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	32050.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29564.09	630924.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29564.09	630924.27

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	155915.00	892556.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	32050.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	155915.00	860506.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	29564.09	203486.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	491.15
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	29564.09	202995.02

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. ABBASI, FARAZ, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12517 PEMBROOKE CIRCLE  
 City CARMEL State IN Zip Code 46032-8340  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CENTERFIELD CAPITAL PARTNERS Occupation (for Individual) PRIVATE EQUITY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 05 / 2026  
**Transaction ID : SA11A.199030**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. BARNES, JOSEPH, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1520 MAIRN AVENUE  
 City CARMEL State IN Zip Code 46032-8603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALLIED SOLUTIONS, LLC Occupation (for Individual) RECOVERY SPECIALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 11 / 2026  
**Transaction ID : SA11A.199095**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. BAYT, JACK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 557 LORD STREET  
 City INDIANAPOLIS State IN Zip Code 46202-4014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BALLROOM HOLDINGS, LLC Occupation (for Individual) HOSPITALITY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 20 / 2026  
**Transaction ID : SA11A.199155**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 9000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. BODNEY, STEPHEN, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4020 GRAN HAVEN DRIVE  
 City BLOOMINGTON State IN Zip Code 47401-9468  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HARRISON COUNTY HOSPITAL Occupation (for Individual) SURGEON  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 24 / 2026  
**Transaction ID : SA11A.199205**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

**B. BUTTERFIELD, JAMES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4213 NORWICH PLACE  
 City EVANSVILLE State IN Zip Code 47725-7500  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EVANSVILLE SURGICAL ASSOCIATES, INC. Occupation (for Individual) CHIEF EXECUTIVE OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 23 / 2026  
**Transaction ID : SA11A.199200**  
 Amount of Each Receipt this Period 750.00  
 Memo Item  
**CONTRIBUTION**

**C. CHAPELLE, JOSEPH, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 355 EAST OHIO STREET #306  
 City INDIANAPOLIS State IN Zip Code 46204-2176  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BARNES & THORNBURG Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 05 / 06 / 2026  
**Transaction ID : SA11A.199037**  
 Amount of Each Receipt this Period 3500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CHOU, SEEMAY, , ,**

Mailing Address **2625 ALCATRAZ AVENUE**

City **BERKELEY**    State **CA**    Zip Code **94705-2702**

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

Name of Employer (for Individual) **ARCADIA**    Occupation (for Individual) **CEO**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**12000.00**

Date of Receipt  
**05 / 21 / 2026**

**Transaction ID : SA11A.199173**

Amount of Each Receipt this Period  
**3500.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CHOU, SEEMAY, , ,**

Mailing Address **2625 ALCATRAZ AVENUE**

City **BERKELEY**    State **CA**    Zip Code **94705-2702**

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

Name of Employer (for Individual) **ARCADIA**    Occupation (for Individual) **CEO**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**12000.00**

Date of Receipt  
**05 / 21 / 2026**

**Transaction ID : SA11A.199174**

Amount of Each Receipt this Period  
**3500.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CHOU, SEEMAY, , ,**

Mailing Address **2625 ALCATRAZ AVENUE**

City **BERKELEY**    State **CA**    Zip Code **94705-2702**

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

Name of Employer (for Individual) **ARCADIA**    Occupation (for Individual) **CEO**

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
**12000.00**

Date of Receipt  
**05 / 21 / 2026**

**Transaction ID : SA11A.199175**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **12000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. CHURCH, RICHARD, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 27 / 2026 <b>Transaction ID : SA11A.199227</b>
Mailing Address 590 W WATER WORKS RD		Amount of Each Receipt this Period 3000.00
City WABASH	State IN	Zip Code 46992-9208
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) PARKVIEW HEALTH	Occupation (for Individual) CHIEF STRATEGY OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. COX, DENNY, C., MR.,</b>		Date of Receipt MM / DD / YYYY 05 / 29 / 2026 <b>Transaction ID : SA11A.199275</b>
Mailing Address 2104 LAKE STREET		Amount of Each Receipt this Period 300.00
City NEW ALBANY	State IN	Zip Code 47150-2705
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. DILLON, GARY, P., DR.,</b>		Date of Receipt MM / DD / YYYY 05 / 06 / 2026 <b>Transaction ID : SA11A.199038</b>
Mailing Address 8378 E RYERSON RD		Amount of Each Receipt this Period 2500.00
City PIERCETON	State IN	Zip Code 46562-9765
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. GABHART, NATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6590 S 1050 E  
 City LOOGOOTE  
 State IN Zip Code 47553-5683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TRUESCRIPTS Occupation (for Individual) PHARMACIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 21 / 2026  
**Transaction ID : SA11A.199172**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. GOODRICH, CHARLES, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5750 CASTLE CREEK PKWY N DRIVE  
 City INDIANAPOLIS  
 State IN Zip Code 46250-4338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GAYLOR ELECTRIC Occupation (for Individual) PRESIDENT & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2026  
**Transaction ID : SA11A.199143**  
 Amount of Each Receipt this Period  
 12500.00  
 Memo Item  
**CONTRIBUTION**

**C. GOODRICH, TRICIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5015 NIGHT SHADE LANE  
 City NOBLESVILLE  
 State IN Zip Code 46062-9818  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 12500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2026  
**Transaction ID : SA11A.199142**  
 Amount of Each Receipt this Period  
 12500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. GROSSNICKLE, TED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 498 NORTH MAIN STREET  
 City FRANKLIN State IN Zip Code 46131-1744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JOHNSON, GROSSNICKLE AND ASSOCIATES Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 18 / 2026  
**Transaction ID : SA11A.199145**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 CONTRIBUTION

**B. GUNDEN, DONALD, K., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 64874 ORCHARD DR  
 City GOSHEN State IN Zip Code 46526-9118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 05 / 11 / 2026  
**Transaction ID : SA11A.199094**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item  
 CONTRIBUTION

**C. GUNDEN, THERESA, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 64874 ORCHARD DRIVE  
 City GOSHEN State IN Zip Code 46526-9118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 05 / 11 / 2026  
**Transaction ID : SA11A.199090**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	16000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. HAMMOND, JOHN, R., MR., III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 612 EAST 13TH STREET  
 City INDIANAPOLIS State IN Zip Code 46202-2732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TAFT STETTINIUS HOLLISTER LLP Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 05 / 20 / 2026  
**Transaction ID : SA11A.199209**  
 Amount of Each Receipt this Period 3500.00  
 Memo Item  
**CONTRIBUTION**

**B. HINGST, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3402 WOODHAVEN TRAIL  
 City KOKOMO State IN Zip Code 46902-5063  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 29 / 2026  
**Transaction ID : SA11A.199272**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. HOOD, TONY, E., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 WEST BUENA VISTA ROAD APT 150  
 City EVANSVILLE State IN Zip Code 47710-5187  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 29 / 2026  
**Transaction ID : SA11A.199294**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. HUDDLESTON, DUSTIN, D., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 98 W JEFFERSON STREET  
 City FRANKLIN State IN Zip Code 46131-2311  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HUDDLESTON & HUDDLESTON Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 22 / 2026  
**Transaction ID : SA11A.199190**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

**B. JACQUAY, DENA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4885 N 550 E  
 City CHURUBUSCO State IN Zip Code 46723-9726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PARKVIEW HEALTH Occupation (for Individual) ADMINISTRATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 05 / 27 / 2026  
**Transaction ID : SA11A.199228**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item  
**CONTRIBUTION**

**C. KENLEY, LUKE, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 HARBOUR TREES LANE  
 City NOBLESVILLE State IN Zip Code 46062-9079  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) STATE OF INDIANA Occupation (for Individual) STATE SEN. SD-10  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 29 / 2026  
**Transaction ID : SA11A.199274**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 23  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. KITE, PAUL, , ,**

Mailing Address **7267 HUNT CLUB LANE**

City <b>ZIONSVILLE</b>	State <b>IN</b>	Zip Code <b>46077-9378</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>STRONGBOX COMMERCIAL</b>	Occupation (for Individual) <b>REAL ESTATE</b>
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**05 / 16 / 2026**

**Transaction ID : SA11A.199134**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. MCCALED, JED, , ,**

Mailing Address **2625 ALCATRAZ AVENUE #201**

City <b>BERKELEY</b>	State <b>CA</b>	Zip Code <b>94705-2702</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>VAST</b>	Occupation (for Individual) <b>FOUNDER</b>
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**12000.00**

Date of Receipt  
**05 / 22 / 2026**

**Transaction ID : SA11A.199191**

Amount of Each Receipt this Period  
**3500.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MCCALED, JED, , ,**

Mailing Address **2625 ALCATRAZ AVENUE #201**

City <b>BERKELEY</b>	State <b>CA</b>	Zip Code <b>94705-2702</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>VAST</b>	Occupation (for Individual) <b>FOUNDER</b>
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**12000.00**

Date of Receipt  
**05 / 22 / 2026**

**Transaction ID : SA11A.199192**

Amount of Each Receipt this Period  
**3500.00**

Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>8000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 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)  
**YOUNG VICTORY COMMITTEE**

**A. MCCALED, JED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2625 ALCATRAZ AVENUE #201  
 City BERKELEY State CA Zip Code 94705-2702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VAST Occupation (for Individual) FOUNDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 12000.00

Date of Receipt 05 / 22 / 2026  
**Transaction ID : SA11A.199193**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. MCCOY, SHAWN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 416 SOUTH ROOSEVELT DRIVE  
 City EVANSVILLE State IN Zip Code 47714-1630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DEACONESS HEALTH SYSTEM Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 28 / 2026  
**Transaction ID : SA11A.199234**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**C. OLLIER, MARY, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1552 E. LEGION ROAD SUITE B  
 City BATESVILLE State IN Zip Code 47006-7127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 11 / 2026  
**Transaction ID : SA11A.199089**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. PENCE, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1455 PENNSYLVANIA AVE NW  
 400  
 City WASHINGTON State DC Zip Code 20004-1017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PENCE LAW GROUP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 28 / 2026  
**Transaction ID : SA11A.199250**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. RATHMANN, DETLEF, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 145 EDGEWATER DRIVE  
 City NOBLESVILLE State IN Zip Code 46062-9190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 20 / 2026  
**Transaction ID : SA11A.199208**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. REIS, KIRK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 300 N MERIDIAN ST  
 SUITE 1400  
 City INDIANAPOLIS State IN Zip Code 46204-1737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FIRST FINANCIAL BANK Occupation (for Individual) REGIONAL MARKET PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2026  
**Transaction ID : SA11A.199152**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 23
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. ROMAIN, RONALD, D., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11111 BROWNING RD.  
 City EVANSVILLE State IN Zip Code 47725-8667  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNITED COMPANIES Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 09 / 2026  
**Transaction ID : SA11A.199073**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
**CONTRIBUTION**

**B. ROOD, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1649 ATLANTIC BLVD  
 City JACKSONVILLE State FL Zip Code 32207-3346  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VESTCOR COMPANIES Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 05 / 29 / 2026  
**Transaction ID : SA11A.199269**  
 Amount of Each Receipt this Period 7000.00  
 Memo Item  
**CONTRIBUTION**

**C. ROOD, SONYA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1649 ATLANTIC BOULEVARD  
 City JACKSONVILLE State FL Zip Code 32207-3346  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 05 / 29 / 2026  
**Transaction ID : SA11A.199268**  
 Amount of Each Receipt this Period 7000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	24000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. ROWE, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13033 SOUTHAMPTON COURT  
 City CARMEL State IN Zip Code 46032-9599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNITED CONSULTING Occupation (for Individual) ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 11 / 2026  
**Transaction ID : SA11A.199092**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. SANDERS, JOSEPH, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 365 ELLENDALE PARKWAY  
 City CROWN POINT State IN Zip Code 46307-4343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OZINGA INDIANA Occupation (for Individual) EXECUTIVE VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2026  
**Transaction ID : SA11A.199302**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**CONTRIBUTION**

**C. SAPPENFIELD, JACOB, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41 GRASSY CREEK DR  
 City WHITELAND State IN Zip Code 46184-9632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FIRST FINANCIAL BANK Occupation (for Individual) COMMERCIAL MARKET PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2026  
**Transaction ID : SA11A.199149**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 19 OF 23  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. SOLDATIS, JEFFERY, J., DR., M.D.**

Mailing Address 7535 W 96TH ST

City ZIONSVILLE    State IN    Zip Code 46077-8712

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

Name of Employer (for Individual) ORTHOINDY    Occupation (for Individual) PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 26 / 2026  
**Transaction ID : SA11A.199207**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. TICHENOR, WARREN, W., ,**

Mailing Address 45 NE LOOP 410 SUITE 265

City SAN ANTONIO    State TX    Zip Code 78216-5833

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

Name of Employer (for Individual) W.W. TICHENOR & CO., INC.    Occupation (for Individual) PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 12 / 2026  
**Transaction ID : SA11A.199114**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. GCG INVESTMENTS LLC**

Mailing Address 5900 NORTH 400 WEST

City BARGERSVILLE    State IN    Zip Code 46106-9763

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

Name of Employer (for Individual)    Occupation (for Individual)

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2026  
**Transaction ID : SA11A.199144**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
GURNIK, GREGORY, , ,

Mailing Address 5900 NORTH 400 WEST

City BARGERSVILLE	State IN	Zip Code 46106-9763
----------------------	-------------	------------------------

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

Name of Employer (for Individual) GCG INVESTMENTS	Occupation (for Individual) PRINCIPAL
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M	D D	Y Y Y Y
05	15	2026

**Transaction ID : SA11A.199388**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	D D	Y Y Y Y
-----	-----	---------

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M	D D	Y Y Y Y
-----	-----	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	153300.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 04 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I3343!

Amount of Each Disbursement this Period: 174.08

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 13 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I3353!

Amount of Each Disbursement this Period: 788.70

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 05 / 20 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I3357

Amount of Each Disbursement this Period: 113.10

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1075.88

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOUNG VICTORY COMMITTEE**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 28 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I3359

Amount of Each Disbursement this Period: 1288.58

Memo Item

**B. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I33441

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. SOCKO STRATEGIES, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1101 30TH ST NW STE 125

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 21 / 2026

FEC Identification Number: C

Transaction ID : SB21B.I3355

Amount of Each Disbursement this Period: 16076.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 17865.32

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**YOUNG VICTORY COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THE VOYAGEUR COMPANY, LLC**

Mailing Address 1151 ORCHARD CIRCLE

City  
SAINT PAUL

State  
MN

Zip Code  
55118-4146

Purpose of Disbursement  
PRINTING/POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.I3353

Amount of Each Disbursement this Period

10597.89

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

10597.89

29539.09