

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

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

DR SAM FOR CONGRESS

ADDRESS (number and street)

1050 JOHNNIE DODDS BLVD

#341

Check if different
than previously
reported. (ACC)

MOUNT PLEASANT

SC

29465

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00919068

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

SC

01

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 / 2026

through

M M / D D / Y Y Y Y
03 / 31 / 2026*I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.*

Type or Print Name of Treasurer Cuddy, Brian, , Dr.,

Signature of Treasurer

Cuddy, Brian, , Dr.,

Date

M M / D D / Y Y Y Y
05 / 27 / 2026

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

DR SAM FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026

	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))	54705.99	276649.85
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	54705.99	276649.85
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	178600.85	303550.78
(b) Total Offsets to Operating Expenditures (from Line 14)	456.70	456.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	178144.15	303094.08
8. Cash on Hand at Close of Reporting Period (from Line 27)	1214911.09	
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)	1249100.09	

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

DR SAM FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

47829.32

265182.79

(ii) Unitemized

876.67

1467.06

(iii) TOTAL of contributions
from individuals ▶

48705.99

266649.85

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

6000.00

10000.00

(d) The Candidate

0.00

0.00

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

54705.99

276649.85

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

250000.00

1249100.09

(b) All Other Loans.....

0.00

0.00

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

250000.00

1249100.09

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

456.70

456.70

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)..... ▶

305162.69

1526206.64

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.....

178600.85

303550.78

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees

0.00

0.00

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0.00

0.00

21. OTHER DISBURSEMENTS

667.61

7744.77

22. **TOTAL DISBURSEMENTS**

(add Lines 17, 18, 19(c), 20(d), and 21) ►

179268.46

311295.55

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

1089016.86

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....

305162.69

25. SUBTOTAL (add Line 23 and Line 24).....

1394179.55

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

179268.46

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25).....

1214911.09

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

PAGE 5 OF 41

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 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)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A, John, , ,

A.

Mailing Address 265 Coinbow Circle

City

Mount Pleasant

State

SC

Zip Code

29464

FEC ID number of contributing
federal political committee.

C

Name of Employer
Financial AdvisorOccupation
Truist

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

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

Transaction ID : SA11AI.4754

Amount of Each Receipt this Period

260.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

Bingham, Bruce, , ,

B.

Mailing Address 3040 Linksland Rd

City

Mt Pleasant

State

SC

Zip Code

29466

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

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		2	0		2	0	2	6

Transaction ID : SA11AI.4679

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Boone, Gary, , ,

C.

Mailing Address 4927 Sound View Dr

City

Mt Pleasant

State

SC

Zip Code

29466

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tide-In Marine LLCOccupation
Owner

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4685

Amount of Each Receipt this Period

250.00

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

1010.25

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 6 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Brown, Candace, , ,

A.

Mailing Address 861 Santee Dr

City

Florence

State

SC

Zip Code

29501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

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
03 27 2026

Transaction ID : SA11AI.5048

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Reattribute: James Brown 3/27/2026

Full Name (Last, First, Middle Initial)

Brown, James, , ,

B.

Mailing Address 861 Santee Dr

City

Florence

State

SC

Zip Code

29501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Synergi Partners

Occupation

CEO

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
03 27 2026

Transaction ID : SA11AI.4672

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Brown, James, , ,

C.

Mailing Address 861 Santee Dr

City

Florence

State

SC

Zip Code

29501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Synergi Partners

Occupation

CEO

Receipt For: 2026

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 27 2026

Transaction ID : SA11AI.4673

Amount of Each Receipt this Period

3500.00

☐ Memo Item

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

10500.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Brown, James, , ,

A.

Mailing Address 861 Santee Dr

City

Florence

State

SC

Zip Code

29501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Synergi Partners

Occupation

CEO

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
03 27 2026

Transaction ID : SA11AI.5047

Amount of Each Receipt this Period

- 3500.00

☐ Memo Item

Reattribute: Candace Brown 3/27/2026

Full Name (Last, First, Middle Initial)

Brymer, Scott, , ,

B.

Mailing Address 1843 Village Crossing Drive

City

Charleston

State

SC

Zip Code

29492

FEC ID number of contributing
federal political committee.

C

Name of Employer

Real estate

Occupation

Self-Employed

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
03 15 2026

Transaction ID : SA11AI.4746

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Brymer, Scott, , ,

C.

Mailing Address 1843 Village Crossing Drive

City

Charleston

State

SC

Zip Code

29492

FEC ID number of contributing
federal political committee.

C

Name of Employer

Real estate

Occupation

Self-Employed

Receipt For: 2026

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3643.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 15 2026

Transaction ID : SA11AI.4747

Amount of Each Receipt this Period

143.56

☐ Memo Item

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

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

143.56

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

Use separate schedule(s)
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FOR LINE NUMBER:
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PAGE 8 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Bucshon, Larry, , ,

A.

Mailing Address 3253 Sutton Pl NW

Apt A

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Policy Advisor

Occupation

Holland and Knight, LLP

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 20 2026

Transaction ID : SA11AI.4740

Amount of Each Receipt this Period

1041.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

Daly, John, , ,

B.

Mailing Address 10 Bowman Road

City

Greenville

State

SC

Zip Code

29615

FEC ID number of contributing
federal political committee.

C

Name of Employer
Physician

Occupation

Carolina Radiolaogy

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2602.54

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 13 2026

Transaction ID : SA11AI.4763

Amount of Each Receipt this Period

2602.54

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dubose, Christopher, , ,

C.

Mailing Address 309 Honey Hill Cir

City

Ridgeland

State

SC

Zip Code

29936

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southeastern Limb and Tree Company

Occupation

Owner

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
03 20 2026

Transaction ID : SA11AI.4677

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

5143.56

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

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

Use separate schedule(s)
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PAGE 9 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Fox, Daniel, , ,

A.

Mailing Address 1461 Weaver St

City

Timmons ville

State

SC

Zip Code

29161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anesthesiologist

Occupation

McLeod Physician Associates

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 19 2026

Transaction ID : SA11AI.4758

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Fox, Daniel, , ,

B.

Mailing Address 1461 Weaver St

City

Timmons ville

State

SC

Zip Code

29161

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anesthesiologist

Occupation

McLeod Physician Associates

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3643.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 19 2026

Transaction ID : SA11AI.4759

Amount of Each Receipt this Period

143.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hall, Hunter, , ,

C.

Mailing Address 8605 Cyrus Place

City

Alexandria

State

VA

Zip Code

22308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Government Affairs

Occupation

The Picard Group

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 26 2026

Transaction ID : SA11AI.4730

Amount of Each Receipt this Period

1000.00

☐ Memo Item

4643.56

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)
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PAGE 10 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Jackson, William, , ,

A.

Mailing Address 15 Anchor Cove Ct

City

Bluffton

State

SC

Zip Code

29910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiologist

Occupation

Jackson Radiology Consultants, LLC

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	6

Transaction ID : SA11AI.4742

Amount of Each Receipt this Period

3500.00



Memo Item

Full Name (Last, First, Middle Initial)

Keller, Kevin, , ,

B.

Mailing Address 49 Parkins Lake Rd

City

Greenville

State

SC

Zip Code

29607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Physician

Occupation

Augusta Road Arsthetica

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		3	1		2	0	2	6

Transaction ID : SA11AI.4723

Amount of Each Receipt this Period

2500.00



Memo Item

Full Name (Last, First, Middle Initial)

Klein, Herbert, , ,

C.

Mailing Address 1103 Oyster View Ct

City

Mt Pleasant

State

SC

Zip Code

29466

FEC ID number of contributing
federal political committee.

C

Name of Employer

Marchi Mobile Inc

Occupation

President

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4687

Amount of Each Receipt this Period

250.00



Memo Item

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

6250.00

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)

PAGE 11 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Manganiello, Edward, , ,

A.

Mailing Address 1450 Cotton Bounty Ct

City

Mt Pleasant

State

SC

Zip Code

29466

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bruckmann & Victory LLP

Occupation

Attorney

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4683

Amount of Each Receipt this Period

250.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

Milligan & Associates LLC

Mailing Address PO Box 4845

City

Florence

State

SC

Zip Code

29502

FEC ID number of contributing
federal political committee.

C

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
0	3		2	7		2	0	2	6

Transaction ID : SA11AI.4656

Amount of Each Receipt this Period

500.00



Memo Item

JFC/Partnership

C.

Full Name (Last, First, Middle Initial)

Milligan, David, , ,

Mailing Address PO Box 4845

City

Florence

State

SC

Zip Code

29502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Milligan & Associates LLC

Occupation

Owner

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		2	7		2	0	2	6

Transaction ID : SA11AI.4656.0

Amount of Each Receipt this Period

500.00



Memo Item

Attributed to Milligan & Associates LLC

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

750.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Murphy, Monica, , ,

A.

Mailing Address 1450 Oakbrook Drive
Ste 900

City
Norcross

State
GA

Zip Code
30093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interior Designer

Occupation
Self-Employed

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
03 26 2026

Transaction ID : SA11AI.4725

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Murphy, Monica, , ,

B.

Mailing Address 1450 Oakbrook Drive
Ste 900

City
Norcross

State
GA

Zip Code
30093

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interior Designer

Occupation
Self-Employed

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3643.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 26 2026

Transaction ID : SA11AI.4726

Amount of Each Receipt this Period

143.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

Murrell, Jeffery, , ,

C.

Mailing Address 1401 Lazar Pl

City
Florence

State
SC

Zip Code
29501

FEC ID number of contributing
federal political committee.

C

Name of Employer
McLeod Health

Occupation
Associate VP

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 04 2026

Transaction ID : SA11AI.4670

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)..... ▶

4643.56

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

PAGE 13 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Musselman, David, , ,

A.

Mailing Address 104 Dolphin Point Dr

City

Beaufort

State

SC

Zip Code

29907

FEC ID number of contributing
federal political committee.

C

Name of Employer
SalesOccupation
SMPA

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
0	3		3	1		2	0	2	6

Transaction ID : SA11AI.4721

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Olshever, Robert, , ,

B.

Mailing Address 4915 Sound View Drive

City

Mount Pleasant

State

SC

Zip Code

29466

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M		D	D		Y	Y	Y	Y
0	3		2	1		2	0	2	6

Transaction ID : SA11AI.4737

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Olshever, Robert, , ,

C.

Mailing Address 4915 Sound View Drive

City

Mount Pleasant

State

SC

Zip Code

29466

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

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		2	1		2	0	2	6

Transaction ID : SA11AI.4738

Amount of Each Receipt this Period

250.00

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

750.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Parham, Rose, , ,

A.

Mailing Address 2657 Ascot

City

Florence

State

SC

Zip Code

29501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lawyer

Occupation

Parham Law Firm

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
03 24 2026

Transaction ID : SA11AI.4734

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Parham, Rose, , ,

B.

Mailing Address 2657 Ascot

City

Florence

State

SC

Zip Code

29501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lawyer

Occupation

Parham Law Firm

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3643.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 24 2026

Transaction ID : SA11AI.4735

Amount of Each Receipt this Period

143.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

Phillips, Alton, , ,

C.

Mailing Address 94 Church St

City

Charleston

State

SC

Zip Code

29401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carolina Eastern Inc

Occupation

President

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 04 2026

Transaction ID : SA11AI.4666

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)..... ▶

4643.56

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 15 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Ramsay, Alex, , ,

A.

Mailing Address 326 Parkdale Drive

City

Charleston

State

SC

Zip Code

29414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Urologist

Occupation

Cardinal health

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 25 2026

Transaction ID : SA11AI.4732

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Roquemore, James, , ,

B.

Mailing Address 4460 Five Chop Rd

City

Cameron

State

SC

Zip Code

29030

FEC ID number of contributing
federal political committee.

C

Name of Employer

SouthState Bank Corp

Occupation

Independent Director

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 04 2026

Transaction ID : SA11AI.4668

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Santella, Nicholas, , ,

C.

Mailing Address 5849 Back Bay Dr

City

Isle of Palms

State

SC

Zip Code

29451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2026

Transaction ID : SA11AI.4675

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

1750.00

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 16 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Shapiro, Patricia, , ,

A.

Mailing Address 6 Everglade Place

City

Hilton Head Island

State

SC

Zip Code

29928

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.25

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 19 2026

Transaction ID : SA11AI.4744

Amount of Each Receipt this Period

260.25

☐ Memo Item

Full Name (Last, First, Middle Initial)

Simcox, David, , ,

B.

Mailing Address 2277 Bees Creek Rd

City

Ridgeland

State

SC

Zip Code

29936

FEC ID number of contributing
federal political committee.

C

Name of Employer

Real Estate Broker

Occupation

Simcox Holdings LLC

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1041.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 29 2026

Transaction ID : SA11AI.4768

Amount of Each Receipt this Period

1041.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

Turner, Rodney, , ,

C.

Mailing Address 1450 Oakbrook Drive
Ste 900

City

Norcross

State

GA

Zip Code

30093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Executive

Occupation

MGT

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
03 26 2026

Transaction ID : SA11AI.4728

Amount of Each Receipt this Period

3500.00

☐ Memo Item

4801.27

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 17 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

Vitale, Louis, , ,

A. Mailing Address 1100 Oyster View Ct

City

Mt Pleasant

State

SC

Zip Code

29466

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : SA11AI.4681

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WillisElgin II LLC

B. Mailing Address 6112 Josie Ridge Rd

City

Wadmalaw Island

State

SC

Zip Code

29487

FEC 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
0	3		3	1		2	0	2	6

Transaction ID : SA11AI.4663

Amount of Each Receipt this Period

2500.00

☐ Memo Item

JFC/Partnership

Full Name (Last, First, Middle Initial)

Willis, Scott, , ,

C. Mailing Address 6112 Josie Ridge Rd

City

Wadmalaw Island

State

SC

Zip Code

29487

FEC ID number of contributing
federal political committee.

C

Name of Employer

WillisElgin II LLC

Occupation

Owner

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		3	1		2	0	2	6

Transaction ID : SA11AI.4663.0

Amount of Each Receipt this Period

2500.00

☒ Memo Item

Attributed to WillisElgin II, LLC

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

2800.00

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

47829.32

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 18 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION PAC

A.

Mailing Address 1892 PRESTON WHITE DRIVE

City

RESTON

State

VA

Zip Code

20191

FEC ID number of contributing
federal political committee.

C C00343459

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 31 2026

Transaction ID : SA11C.4601

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HEALTHCARE FREEDOM FUND

B.

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152

FEC ID number of contributing
federal political committee.

C C00528414

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 31 2026

Transaction ID : SA11C.4658

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)..... ▶

6000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

MCCOWN, SAM DR, , ,

Mailing Address 1050 JOHNNIE DODDS BLVD

#341

City

MOUNT PLEASANT

State

SC

Zip Code

29465

FEC ID number of contributing
federal political committee.

C H6SC01276

Name of Employer

Self-Employed

Occupation

Entrepreneur

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1249100.09

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 31 2026

Transaction ID : SA13A.4599

Amount of Each Receipt this Period

250000.00

☐ Memo Item

Loan from Candidate

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

250000.00

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

250000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)
American Airlines

A. Mailing Address 4333 Amon Carter Blvd

City
Dallas

State
TX

Zip Code
75261

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

451.40

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 24 2026

Transaction ID : SA14.4588

Amount of Each Receipt this Period

451.40

☐ Memo Item
Refund of Travel Expense

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

451.40

451.40

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

PAGE 21 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AC Hotel

Mailing Address 1999 Richmond Hwy

City
ArlingtonState
VAZip Code
22202Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1031.96

Transaction ID : SB17.4579

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
DallasState
TXZip Code
75261Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1513.60

Transaction ID : SB17.4562

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd

City
DallasState
TXZip Code
75261Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

451.40

Transaction ID : SB17.4578

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

2996.96

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 22 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. American Media Group

Mailing Address 815 Slaters Ln

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Digital Media Buy

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		26		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

54217.55

Transaction ID : SB17.4597

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Capers Island Consulting LLCMailing Address 1240 Fairmont Ave
Unit 17City
Mount PleasantState
SCZip Code
29464Purpose of Disbursement
Political/Admin Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4492

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Capers Island Consulting LLCMailing Address 1240 Fairmont Ave
Unit 17City
Mount PleasantState
SCZip Code
29464Purpose of Disbursement
Political/Admin Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

3000.00

Transaction ID : SB17.4539

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

62217.55

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 23 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Cooper River Bridge Run

Mailing Address 716 S Shelmore Blvd Ste 105

City
Mt. PleasantState
SCZip Code
29464Purpose of Disbursement
Event Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

208.50

Transaction ID : SB17.4589

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Drake Strategies

Mailing Address 730 Natchez Cir

City
Mount PleasantState
SCZip Code
29464Purpose of Disbursement
Political/Admin Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6500.00

Transaction ID : SB17.4447

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Drake Strategies

Mailing Address 730 Natchez Cir

City
Mount PleasantState
SCZip Code
29464Purpose of Disbursement
Mileage

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

184.80

Transaction ID : SB17.4448

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

6893.30

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 24 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Drake Strategies

Mailing Address 730 Natchez Cir

Date of Disbursement

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

City
Mount PleasantState
SCZip Code
29464

FEC Identification Number

C

Purpose of Disbursement
Political/Admin Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6500.00

Transaction ID : SB17.4494

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Drake Strategies

Mailing Address 730 Natchez Cir

Date of Disbursement

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

City
Mount PleasantState
SCZip Code
29464

FEC Identification Number

C

Purpose of Disbursement
Political/Admin Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6500.00

Transaction ID : SB17.4538

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Drummond Communications Group LLC

Mailing Address PO Box 2545

Date of Disbursement

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

City
Mt. PleasantState
SCZip Code
29465

FEC Identification Number

C

Purpose of Disbursement
Polling/Research

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

23750.00

Transaction ID : SB17.4449

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

36750.00

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 25 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Eleven17 Consulting LLC

Mailing Address 730 Natchez Cir

Date of Disbursement

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

City
Mount PleasantState
SCZip Code
29464

FEC Identification Number

C

Purpose of Disbursement
Fundraising/Admin Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4508

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. Eleven17 Consulting LLC

Mailing Address 730 Natchez Cir

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	6

City
Mount PleasantState
SCZip Code
29464

FEC Identification Number

C

Purpose of Disbursement
Fundraising Expense

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4573

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. First Reliance Bank

Mailing Address 800 S Shellmore Blvd

Date of Disbursement

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

City
Mt PleasantState
SCZip Code
29464

FEC Identification Number

C

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.4533

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

15030.00

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 26 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. First Reliance Bank

Mailing Address 800 S Shellmore Blvd

City
Mt PleasantState
SCZip Code
29464Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.4451

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. First Reliance Bank

Mailing Address 800 S Shellmore Blvd

City
Mt PleasantState
SCZip Code
29464Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.4495

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. First Reliance Bank

Mailing Address 800 S Shellmore Blvd

City
Mt PleasantState
SCZip Code
29464Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : SB17.4507

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

110.00

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 27 OF 41

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. First Reliance Bank

Mailing Address 800 S Shellmore Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2026

City
Mt PleasantState
SCZip Code
29464

FEC Identification Number

C

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

80.00

Transaction ID : SB17.4535

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

B. First Reliance Bank

Mailing Address 800 S Shellmore Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
Mt PleasantState
SCZip Code
29464

FEC Identification Number

C

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

120.00

Transaction ID : SB17.4536

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

C. Martin, Wesley, , ,

Mailing Address 3020 Allen Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2026

City
EffinghamState
SCZip Code
29541

FEC Identification Number

C

Purpose of Disbursement
Field Worker

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

6000.00

Transaction ID : SB17.4517

☐ Memo Item

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

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

6200.00

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 28 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Political Financial Management, LLCMailing Address 95 White Bridge Rd
Ste 207City
NashvilleState
TNZip Code
37205Purpose of Disbursement
Compliance/Accounting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4491

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Political Financial Management, LLCMailing Address 95 White Bridge Rd
Ste 207City
NashvilleState
TNZip Code
37205Purpose of Disbursement
Compliance/Accounting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1470.00

Transaction ID : SB17.4502

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Push Digital Group

Mailing Address 342 East Bay St

City
CharlestonState
SCZip Code
29401Purpose of Disbursement
Digital Ads

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4530

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

7970.00

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 29 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Push Digital Group

Mailing Address 342 East Bay St

Date of Disbursement

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

City
CharlestonState
SCZip Code
29401Purpose of Disbursement
Digital/Admin Consulting

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1775.00

Transaction ID : SB17.4496

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Push Digital Group

Mailing Address 342 East Bay St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2026

City
CharlestonState
SCZip Code
29401Purpose of Disbursement
Digital Media Advertising

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4509

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Push Digital Group

Mailing Address 342 East Bay St

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2026

City
CharlestonState
SCZip Code
29401Purpose of Disbursement
Video Production

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

962.50

Transaction ID : SB17.4557

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

7737.50

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 30 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Push Digital Group

Mailing Address 342 East Bay St

City
CharlestonState
SCZip Code
29401Purpose of Disbursement
Digital Ads

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.4583

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1455 Market St

City
San FranciscoState
CAZip Code
94103Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

203.88

Transaction ID : SB17.4571

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 1200 East Algonquin Road

City
Elk Grove VillageState
ILZip Code
60007Purpose of Disbursement
Travel Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

480.40

Transaction ID : SB17.4574

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

5684.28

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 41

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. United States Postal Service

Mailing Address 1050 Johnnie Dodds Blvd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2026

City
Mount PleasantState
SCZip Code
29465

FEC Identification Number

C

Purpose of Disbursement
PO Box Fee

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.4512

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Victory Enterprises, Inc.

Mailing Address 5200 30th St SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2026

City
DavenportState
IAZip Code
52802

FEC Identification Number

C

Purpose of Disbursement
Political/Admin Consulting

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.4452

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Victory Enterprises, Inc.

Mailing Address 5200 30th St SW

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2026

City
DavenportState
IAZip Code
52802

FEC Identification Number

C

Purpose of Disbursement
Video Production

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.4453

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

6125.00

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 32 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Victory Enterprises, Inc.

Mailing Address 5200 30th St SW

City
DavenportState
IAZip Code
52802Purpose of Disbursement
Political/Admin Consulting

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.4503

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Victory Enterprises, Inc.

Mailing Address 5200 30th St SW

City
DavenportState
IAZip Code
52802Purpose of Disbursement
Palm Cards

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1481.10

Transaction ID : SB17.4506

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Victory Enterprises, Inc.

Mailing Address 5200 30th St SW

City
DavenportState
IAZip Code
52802Purpose of Disbursement
Printing

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

130.80

Transaction ID : SB17.4518

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

5611.90

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

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

PAGE 33 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Victory Enterprises, Inc.

Mailing Address 5200 30th St SW

City
DavenportState
IAZip Code
52802Purpose of Disbursement
Signs

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		02		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

7795.68

Transaction ID : SB17.4544

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Victory Enterprises, Inc.

Mailing Address 5200 30th St SW

City
DavenportState
IAZip Code
52802Purpose of Disbursement
Political/Admin Consulting

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.4564

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Victory Enterprises, Inc.

Mailing Address 5200 30th St SW

City
DavenportState
IAZip Code
52802Purpose of Disbursement
Website Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

395.40

Transaction ID : SB17.4565

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

12191.08

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 34 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Victory Enterprises, Inc.

Mailing Address 5200 30th St SW

City
DavenportState
IAZip Code
52802Purpose of Disbursement
Texting/Communications

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.4581

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WinRed Technologies

Mailing Address 330 N Washington St

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

5.13

Transaction ID : SB17.4531

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WinRed Technologies

Mailing Address 330 N Washington St

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

298.35

Transaction ID : SB17.4534

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

328.48

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 35 OF 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WinRed Technologies

Mailing Address 330 N Washington St

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

869.64

Transaction ID : SB17.4537

☐ 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

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

869.64

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

176715.69

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 41

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

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NAME OF COMMITTEE (In Full)

DR SAM FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Beaufort County Republican PartyMailing Address 149 Riverwalk Blvd
Ste 11City
RidgelandState
SCZip Code
29936Purpose of Disbursement
Donation

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

100.00

Transaction ID : SB21.4550

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Colleton County Republican Party

Mailing Address PO Box 1551

City
WalterboroState
SCZip Code
29488Purpose of Disbursement
Contribution

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

217.11

Transaction ID : SB21.4549

☐ 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

Disbursement For:

☐	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

317.11

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

317.11

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

PAGE 37 OF 41

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4102

DR SAM FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MCCOWN, SAM DR, , ,

Mailing Address

1050 JOHNNIE DODDS BLVD
#341

City

MOUNT PLEASANT

State

SC

ZIP Code

29465

☒ Personal Funds of the Candidate

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 18 / 2025

M M / D D / Y Y Y Y

01/31/2045

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

100.00

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

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

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

PAGE 38 OF 41

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4103

DR SAM FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MCCOWN, SAM DR, , ,

Mailing Address

1050 JOHNNIE DODDS BLVD
#341

City

MOUNT PLEASANT

State

SC

ZIP Code

29465

☒ Personal Funds of the Candidate

Original Amount of Loan

100000.09

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.09

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 25 / 2025

M M / D D / Y Y Y Y

01/31/2045

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

100000.09

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

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

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

PAGE 39 OF 41

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4104

DR SAM FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1050 JOHNNIE DODDS BLVD
#341

City

State

ZIP Code

MOUNT PLEASANT

SC

29465

☒ Personal Funds of the Candidate

Original Amount of Loan

765000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

765000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 30 / 2025

M M / D D / Y Y Y Y

01/31/2045

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).....▶

765000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

PAGE 40 OF 41

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4410

DR SAM FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1050 JOHNNIE DODDS BLVD
#341

City

MOUNT PLEASANT

State

SC

ZIP Code

29465

☒ Personal Funds of the Candidate

Original Amount of Loan

134000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

134000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
12 30 / 2025

M M / D D / Y Y Y Y

1/31/2045

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).....▶

134000.00

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

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

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

PAGE 41 OF 41

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4599

DR SAM FOR CONGRESS

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MCCOWN, SAM DR, , ,

Mailing Address

1050 JOHNNIE DODDS BLVD
#341

City

MOUNT PLEASANT

State

SC

ZIP Code

29465

☒ Personal Funds of the Candidate

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

250000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 31 / 2026

M M / D D / Y Y Y Y

01/31/2039

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).....▶

250000.00

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

1249100.09

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