

**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

BARRY MOORE FOR CONGRESS

ADDRESS (number and street)

561 COUNTY ROAD 623

Check if different
than previously
reported. (ACC)

ENTERPRISE

AL

36330

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00720375

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

AL

02

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

04

D D /

01

Y Y Y Y /

2025

through

M M /

06

D D /

30

Y Y Y Y /

2025

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

Type or Print Name of Treasurer

LAPRADE, GARLAND, WAYNE 'SHAG', ,

Signature of Treasurer

LAPRADE, GARLAND, WAYNE 'SHAG', ,

Date

M M /

07

D D /

15

Y Y Y Y /

2025

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

BARRY MOORE FOR CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY
04 / 01 / 2025

To:

MM / DD / YYYY
06 / 30 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	123917.95	260527.91
(b) Total Contribution Refunds (from Line 20(d))	0.00	5500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	123917.95	255027.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	53448.98	152801.17
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	53448.98	152801.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	252767.55	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

BARRY MOORE FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2025

To:

M M / D D / Y Y Y Y
06 / 30 / 2025**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than
Political Committees****(i) Itemized (use Schedule A).....**

99735.00

183085.00

(ii) Unitemized

92.95

282.91

**(iii) TOTAL of contributions
from individuals**

99827.95

183367.91

(b) Political Party Committees.....

0.00

0.00

**(c) Other Political Committees
(such as PACs)**

24090.00

77160.00

(d) The Candidate

0.00

0.00

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

123917.95

260527.91

**12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES**

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the
Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

0.00

0.00

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

123917.95

260527.91

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.....	53448.98	152801.17
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	500.00
(b) Political Party Committees.....	0.00	2500.00
(c) Other Political Committees (such as PACs)	0.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5500.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	53448.98	158301.17

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	182298.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	123917.95
25. SUBTOTAL (add Line 23 and Line 24).....	306216.53
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	53448.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	252767.55

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 48

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

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

NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

AIRBUS AMERICAS, INC. POLITICAL ACTION COMMITTEEMailing Address 1101 PENNSYLVANIA AVE., N.W.
SUITE 800City
WASHINGTONState
DCZip Code
20004FEC ID number of contributing
federal political committee.**C** C00421230

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		11		2025

Transaction ID : SA11AI.22934

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)Mailing Address 1333 NEW HAMPSHIRE AVENUE, NW
SUITE 700City
WASHINGTONState
DCZip Code
20036FEC ID number of contributing
federal political committee.**C** C00004275

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		30		2025

Transaction ID : SA11AI.22931

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN ISRAEL PUBLIC AFFAIRS COMMITTEE POLITICAL ACTION COMMITTEE

Mailing Address 251 H ST NW

City
WASHINGTONState
DCZip Code
20001FEC ID number of contributing
federal political committee.**C** C00797670

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.95

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2025

Transaction ID : SA11AI.22909

Amount of Each Receipt this Period

475.00

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

3975.00

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

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

ANDERSON, ERNEST, , ,

A.

Mailing Address 13842 SHELL BELT ROAD

City

BAYOU LA BATRE

State

AL

Zip Code

36509

FEC ID number of contributing
federal political committee.

C

Name of Employer

CEO

Occupation

GRAHAM SHRIMP CO

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
04 / 23 / 2025

Transaction ID : SA11AI.22922

Amount of Each Receipt this Period

500.00

☐ Memo Item

20250428

B.

Full Name (Last, First, Middle Initial)

CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address 5001 EXECUTIVE PARKWAY

ROOM #3W001

City

SAN RAMON

State

CA

Zip Code

94583

FEC ID number of contributing
federal political committee.

C

C00035006

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2025

Transaction ID : SA11AI.22943

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

DAMPIER, STEPHEN, , ,

Mailing Address PO BOX 161

City

FAIRHOPE

State

AL

Zip Code

36533

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 24 / 2025

Transaction ID : SA11AI.22946

Amount of Each Receipt this Period

3500.00

☐ Memo Item

6500.00

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

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

DAMPIER, STEPHEN, , ,

A. Mailing Address PO BOX 161City
FAIRHOPEState
ALZip Code
36533FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
ATTORNEY

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9000.00

Date of Receipt

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

Transaction ID : SA11AI.22947

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAMPIER, STEPHEN, , ,

B. Mailing Address PO BOX 161City
FAIRHOPEState
ALZip Code
36533FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
ATTORNEY

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

Runoff

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID : SA11AI.22948

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAUZAT, CAROLINE, , ,

C. Mailing Address 1509 ISLAND GREEN DRIVECity
MIRAMAR BEACHState
FLZip Code
32550FEC ID number of contributing
federal political committee.

C

Name of Employer
REX LUMBEROccupation
LUMBER MANUFACTURING

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	6		2	3		2	0	5	

Transaction ID : SA11AI.22881

Amount of Each Receipt this Period

2500.00

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

7000.00

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

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

ESFELLER, PATRICIA, , ,

A. Mailing Address 7140 HWY 188City
CODENState
ALZip Code
36523FEC ID number of contributing
federal political committee.

C

Name of Employer
ESFELLER CONSTRUCTION CO. INC.Occupation
OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 23 2025

Transaction ID : SA11AI.22924

Amount of Each Receipt this Period

3000.00

☐ Memo Item
20250428

Full Name (Last, First, Middle Initial)

GIBSON, JOSEPH, , ,

B. Mailing Address 5040 GLENBROOK TER NWCity
WASHINGTONState
DCZip Code
20016FEC ID number of contributing
federal political committee.

C

Name of Employer
PRINCIPALOccupation
THE GIBSON GROUP

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
06 24 2025

Transaction ID : SA11AI.22949

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HASNAWI, NICK, , ,

C. Mailing Address 102 NA ENTERPRISECity
ENTERPRISEState
ALZip Code
36330FEC ID number of contributing
federal political committee.

C

Name of Employer
MARELOccupation
PTO ENGINEER

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
06 27 2025

Transaction ID : SA11AI.22894

Amount of Each Receipt this Period

500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4000.00

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)

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

A.

Mailing Address 300 INDEPENDENCE AVE

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

8585.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 22 2025

Transaction ID : SA11AI.22905

Amount of Each Receipt this Period

15.00

☐ Memo Item

20250522

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

B.

Mailing Address 300 INDEPENDENCE AVE

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

8605.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 05 2025

Transaction ID : SA11AI.22907

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HOUSE FREEDOM FUND

C.

Mailing Address 300 INDEPENDENCE AVE

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼

☐ General

Election Cycle-to-Date ▼

8630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 12 2025

Transaction ID : SA11AI.22908

Amount of Each Receipt this Period

25.00

☐ Memo Item

60.00

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

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

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

Use separate schedule(s)
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FOR LINE NUMBER:
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PAGE 10 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Hubbard, Stanley, M, ,

A.

Mailing Address P.O. Box 271

City

Campbellton

State

FL

Zip Code

32426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Triple Seven Inovations

Occupation

President

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
06 23 2025

Transaction ID : SA11AI.22944

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Hubbard, Stanley, M, ,

B.

Mailing Address P.O. Box 271

City

Campbellton

State

FL

Zip Code

32426

FEC ID number of contributing
federal political committee.

C

Name of Employer

Triple Seven Inovations

Occupation

President

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
06 23 2025

Transaction ID : SA11AI.22945

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

INTERNATIONAL PAPER PAC

C.

Mailing Address 1101 PENNSYLVANIA AVE NW

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

C00034405

Name of Employer

Occupation

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 22 2025

Transaction ID : SA11AI.22936

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

8000.00

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

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

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

PAGE 11 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

JEMISON, TIMOTHY, , ,

A.

Mailing Address 12625 JEFF HAMILTON RD

City

MOBILE

State

AL

Zip Code

36695

FEC ID number of contributing
federal political committee.

C

Name of Employer

JEMISON MARINE

Occupation

OWNER

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
04 23 2025

Transaction ID : SA11AI.22918

Amount of Each Receipt this Period

3500.00

☐ Memo Item

20250428

Full Name (Last, First, Middle Initial)

JEMISON, TIMOTHY, , ,

B.

Mailing Address 12625 JEFF HAMILTON RD

City

MOBILE

State

AL

Zip Code

36695

FEC ID number of contributing
federal political committee.

C

Name of Employer

JEMISON MARINE

Occupation

OWNER

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 23 2025

Transaction ID : SA11AI.22919

Amount of Each Receipt this Period

1700.00

☐ Memo Item

20250428

Full Name (Last, First, Middle Initial)

KRIVO, GEORGE, , ,

C.

Mailing Address 148 LANSING ISLAND DR

City

SATELLITE BEACH

State

FL

Zip Code

32937

FEC ID number of contributing
federal political committee.

C

Name of Employer

M1 SUPPORT SERVICES

Occupation

CEO

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
05 02 2025

Transaction ID : SA11AI.22898

Amount of Each Receipt this Period

500.00

☐ Memo Item

RECEIVED THROUGH CONDUIT WINRED, LIMIT NOT AFFECTED

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

5700.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARSHALL, TARA, , ,

A.

Mailing Address 2474 ELOONG DR

City

MOBILE

State

AL

Zip Code

36605

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEINER SHIPYARDOccupation
OWNER

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.22926

Amount of Each Receipt this Period

1000.00

☐ Memo Item
20250428

Full Name (Last, First, Middle Initial)

MAYERS, CHLOE, , ,

B.

Mailing Address 6538 WATERFRONT DRIVE

City

TUSCALOOSA

State

AL

Zip Code

35406

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
REALTOR

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	6		0	9		2	0	5	

Transaction ID : SA11AI.22940

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MAYERS, RICHARD (M), , ,

C.

Mailing Address PO BOX 102

City

VERNON

State

AL

Zip Code

35592

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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	6		0	9		2	0	5	

Transaction ID : SA11AI.22939

Amount of Each Receipt this Period

3500.00

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

8000.00

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 13 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

MCALLISTER, NORMOND, , ,

A.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary ☐ General
☒ Other (specify) ▼

Runoff

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11AI.22877

Amount of Each Receipt this Period

1500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

MCALLISTER, NORMOND, , ,

Mailing Address

City

State

Zip Code

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 ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11AI.22878

Amount of Each Receipt this Period

3500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

MCALLISTER, NORMOND, , ,

Mailing Address

City

State

Zip Code

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 ▼

10500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2025

Transaction ID : SA11AI.22879

Amount of Each Receipt this Period

3500.00

☐ Memo Item

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

8500.00

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

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

PAGE 14 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

MCKINNON, MARK, , ,

A.

Mailing Address 2710 VALLEY DR

City

ALEXANDRIA

State

VA

Zip Code

22302

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCKINNON GROUP, LLC

Occupation

GOVERNMENT RELATIONS

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
05 / 12 / 2025

Transaction ID : SA11AI.22897

Amount of Each Receipt this Period

1000.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT
NOT AFFECTED**B.**

Full Name (Last, First, Middle Initial)

MUSK, ELON, , ,

Mailing Address 2110 RANCH RD

City

AUSTIN

State

TX

Zip Code

78734

FEC ID number of contributing
federal political committee.

C

Name of Employer

SPACEX

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
04 / 01 / 2025

Transaction ID : SA11AI.22978

Amount of Each Receipt this Period

3500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT LIMIT NOT
AFFECTED**C.**

Full Name (Last, First, Middle Initial)

WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD
#530

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2025

Transaction ID : SA11AI.22978.0

Amount of Each Receipt this Period

3500.00

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

4500.00

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 15 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

MUSK, ELON, , ,

A.

Mailing Address 2110 RANCH RD

City
AUSTIN

State
TX

Zip Code
78734

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPACEX

Occupation
CEO

Receipt For: 2026

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 01 2025

Transaction ID : SA11AI.22980

Amount of Each Receipt this Period

3100.00

☐ Memo Item

RECEIVED THROUGH CONDUIT LIMIT NOT
AFFECTED

Full Name (Last, First, Middle Initial)

NATIONAL SHOOTING SPORTS FOUNDATION INC.

B.

Mailing Address 11 MILE HILL RD.

City
NEWTOWN

State
CT

Zip Code
06470

FEC ID number of contributing
federal political committee.

C

C30002158

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 16 2025

Transaction ID : SA11AI.22941

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REGIONS FINANCIAL CORPORATION PAC

C.

Mailing Address 1015 15TH STREET NW

City
WASHINGTON

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C

C00432252

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
06 03 2025

Transaction ID : SA11AI.22937

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

9100.00

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 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

RICCIARDONE, ANTHONY, , ,

A.

Mailing Address 10717 COUNTY ROAD 1

City

FAIRHOPE

State

AL

Zip Code

36532

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

BUSSINESSMAN

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 17 2025

Transaction ID : SA11AI.22913

Amount of Each Receipt this Period

3500.00

☐ Memo Item
20250423

Full Name (Last, First, Middle Initial)

RICCIARDONE, ANTHONY, , ,

B.

Mailing Address 10717 COUNTY ROAD 1

City

FAIRHOPE

State

AL

Zip Code

36532

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

BUSSINESSMAN

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
04 17 2025

Transaction ID : SA11AI.22914

Amount of Each Receipt this Period

2500.00

☐ Memo Item
20250423

Full Name (Last, First, Middle Initial)

Roberts, Richard, Y, ,

C.

Mailing Address 3916 Bentwood Ct

City

Fairfax

State

VA

Zip Code

22031

FEC ID number of contributing
federal political committee.

C

Name of Employer

RR&G Public Advocates

Occupation

Principal

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 12 2025

Transaction ID : SA11AI.22935

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)..... ►

7000.00

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 17 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

SEAL PAC

A.

Mailing Address 29243 ST JUST DRIVE

City

UNIONVILLE

State

VA

Zip Code

22567

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 02 2025

Transaction ID : SA11AI.22932

Amount of Each Receipt this Period

1000.00



Memo Item

Full Name (Last, First, Middle Initial)

SEAWRIGHT, ALFRED, , ,

B.

Mailing Address PO BOX 6121

City

MONTGOMERY

State

AL

Zip Code

36106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 01 2025

Transaction ID : SA11AI.22969

Amount of Each Receipt this Period

3000.00



Memo Item

Full Name (Last, First, Middle Initial)

SEAWRIGHT, KEELA, , ,

C.

Mailing Address 350 INDUSTRIAL PARK

City

MONTGOMERY

State

AL

Zip Code

36117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 01 2025

Transaction ID : SA11AI.22973

Amount of Each Receipt this Period

3000.00



Memo Item

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

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

7000.00

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

SEAWRIGHT, KWANZA, , ,

A. Mailing Address 350 INDUSTRIAL PARKCity
MONTGOMERYState
ALZip Code
36117FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 01 2025

Transaction ID : SA11AI.22971

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STEINER, RUSSELL, , ,

B. Mailing Address PO BOX 609City
BAYOU LA BATREState
ALZip Code
36509FEC ID number of contributing
federal political committee.

C

Name of Employer

STEINER CONSTRUCTION COMPANY

Occupation

OWNER AND PRESIDENT

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
04 23 2025

Transaction ID : SA11AI.22928

Amount of Each Receipt this Period

3500.00

☐ Memo Item

20250428

Full Name (Last, First, Middle Initial)

STRICKER, JEFFREY, , ,

C. Mailing Address 6921 SOUTH STATE HIGHWAY 605City
DOTHANState
ALZip Code
36301FEC ID number of contributing
federal political committee.

C

Name of Employer

DERMATOLOGY SPECIALISTS OF ALABAMA

Occupation

PHYSICIAN

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
06 26 2025

Transaction ID : SA11AI.22892

Amount of Each Receipt this Period

3500.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT
NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

10000.00

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

PAGE 19 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILKINS, GERRICK, , ,

A.

Mailing Address 1024 ROYAL MILE HOOVER

City

BIRMINGHAM

State

AL

Zip Code

35242

FEC ID number of contributing
federal political committee.

C

Name of Employer

OMEGA ADVISORS INC

Occupation

CONSULTANT

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 20 / 2025D D / Y Y Y Y Y
20 / 2025Y Y Y Y Y
2025

Transaction ID : SA11AI.22893

Amount of Each Receipt this Period

3300.00

☐ Memo ItemRECEIVED THROUGH CONDUIT WINRED, LIMIT
NOT AFFECTED**B.**

Full Name (Last, First, Middle Initial)

WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD
#530

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

6700.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2025D D / Y Y Y Y Y
01 / 2025Y Y Y Y Y
2025

Transaction ID : SA11AI.22984

Amount of Each Receipt this Period

3100.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

WINRED TECHNICAL SERVICES

Mailing Address 1776 WILSON BLVD
#530

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

6716.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2025D D / Y Y Y Y Y
30 / 2025Y Y Y Y Y
2025

Transaction ID : SA11AI.22902

Amount of Each Receipt this Period

16.00

☒ Memo ItemCONTRIBUTIONS RECEIVED THROUGH CONDUIT
LIMIT NOT AFFECTED**SUBTOTAL** of Receipts This Page (optional)..... ▶

6400.00

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

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESSFull Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICESMailing Address 1776 WILSON BLVD
#530City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8223.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 31 2025

Transaction ID : SA11AI.22903

Amount of Each Receipt this Period

1507.00

☒ Memo ItemCONTRIBUTIONS RECEIVED THROUGH CONDUIT
LIMIT NOT AFFECTEDFull Name (Last, First, Middle Initial)
WINRED TECHNICAL SERVICESMailing Address 1776 WILSON BLVD
#530City
ARLINGTONState
VAZip Code
22219FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15549.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2025

Transaction ID : SA11AI.22904

Amount of Each Receipt this Period

7326.00

☒ Memo ItemCONTRIBUTIONS RECEIVED THROUGH CONDUIT
LIMIT NOT AFFECTEDFull Name (Last, First, Middle Initial)
WIREMAN, LARRY, , ,

Mailing Address PO BOX 510

City
ORANGE BEACHState
ALZip Code
35561FEC ID number of contributing
federal political committee.

C

Name of Employer

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 Y
04 23 2025

Transaction ID : SA11AI.22930

Amount of Each Receipt this Period

2500.00

☐ Memo Item

20250428

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

2500.00

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

WRIGHT, STANLEY, , ,

A. Mailing Address PO BOX 914City
BAYOU LA BATREState
ALZip Code
36509FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 23 2025

Transaction ID : SA11AI.22921

Amount of Each Receipt this Period

1000.00

☐ Memo Item
20250428

Full Name (Last, First, Middle Initial)

ZIRLOTT, JEREMY, , ,

B. Mailing Address PO BOX 553City
CODENState
ALZip Code
35523FEC ID number of contributing
federal political committee.

C

Name of Employer
ZIRLOTT TRAWLERS, INC.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 Y
04 22 2025

Transaction ID : SA11AI.22916

Amount of Each Receipt this Period

500.00

☐ Memo Item
20250428

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

Amount of Each Receipt this Period

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

1500.00

99735.00

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

PAGE 22 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

ALLIED PILOTS ASSOCIATION PAC**A.**

Mailing Address 14600 TRINITY BLVD

City

FORT WORTH

State

TX

Zip Code

76155

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

C00267849

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 01 / 2025D D / Y Y Y Y Y
01 / 2025Y Y Y Y Y
2025

Transaction ID : SA11C.22975

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION OF CROP INSURERS PAC**B.**Mailing Address 1701 PENNSYLVANIA AVE, NW
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20006

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

C00172833

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2025D D / Y Y Y Y Y
26 / 2025Y Y Y Y Y
2025

Transaction ID : SA11C.22868

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BURT HOLDINGS LLC**C.**

Mailing Address PO BOX 158

City

VANCE

State

AL

Zip Code

35490

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 Y
06 / 25 / 2025D D / Y Y Y Y Y
25 / 2025Y Y Y Y Y
2025

Transaction ID : SA11C.22871

Amount of Each Receipt this Period

2500.00

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

4500.00

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 23 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

CARLISLE, JEFFREY, , ,

A. Mailing Address 5109 STARLIT DR S

City
MOBILE

State
AL

Zip Code
36693

FEC ID number of contributing
federal political committee.

C

Name of Employer
HIGHLAND TRANSPORTATION GROUP, LLC

Occupation
PARTNER

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
04 10 2025

Transaction ID : SA11C.22870

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ENTERPRISE INSURANCE SERVICES, LLC.

B. Mailing Address PO BOX 311345

City
ENTERPRISE

State
AL

Zip Code
36331

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 Y Y
04 02 2025

Transaction ID : SA11C.22880

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ENTERPRISE INSURANCE SERVICES, LLC.

C. Mailing Address PO BOX 311345

City
ENTERPRISE

State
AL

Zip Code
36331

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 Y Y
04 15 2025

Transaction ID : SA11C.22876

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

2000.00

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

FREEDOM FIRST PAC

A.

Mailing Address PO BOX 97485

City
RALEIGHState
NCZip Code
27624FEC ID number of contributing
federal political committee.**C** C00503094

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
0	5		0	5		2	0	2	5

Transaction ID : SA11C.22882

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL CHICKEN COUNCIL PAC

B.

Mailing Address 1152 15TH STREET NW

City
WASHINGTONState
DCZip Code
20005FEC ID number of contributing
federal political committee.**C** C00034272

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11C.22875

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL TANK TRUCK CARRIERS INC POLITICAL ACTION COMMITTEE

C.Mailing Address 4300 WILSON BLVD
STE 520City
ARLINGTONState
VAZip Code
22203FEC ID number of contributing
federal political committee.**C** C00188011

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	4		0	9		2	0	2	5

Transaction ID : SA11C.22874

Amount of Each Receipt this Period

2500.00

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

8500.00

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

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

PAGE 25 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

REALTOR PAC

A.

Mailing Address 430 NORTH MICHIGAN AVE

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

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		04		2025

Transaction ID : SA11C.22867

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE FARM CREDIT COUNCIL PAC

B.Mailing Address 50 F STREET NW
STE 900City
WASHINGTONState
DCZip Code
20001FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		29		2025

Transaction ID : SA11C.22869

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Toyota Motor N.A. Inc PAC, Toyota/Lexus PAC, , ,

C.Mailing Address 325 7th Street NW
Suite 1000City
Washington,State
DCZip Code
20004FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

PAC

PAC

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
04		01		2025

Transaction ID : SA11C.22967

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

WHISENANT, KERRICK, , ,

A.

Mailing Address 435 FARM SUPPLY ROAD

City

LACEYS SPRING

State

AL

Zip Code

35754

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIMESTONE BUILDING GROUP

Occupation

CONSTRUCTION EXEC

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
06 30 2025

Transaction ID : SA11C.22872

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHISNEANT, KERRICK, , ,

B.

Mailing Address 435 FARM SUPPLY RD

City

LACEYS SPRING

State

AL

Zip Code

35754

FEC ID number of contributing
federal political committee.

C

Name of Employer

LIMESTONE BLDG GROUP

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
06 30 2025

Transaction ID : SA11C.22873

Amount of Each Receipt this Period

1500.00

☐ 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)..... ▶

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

5000.00

24000.00

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

PAGE 27 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AAA STORAGEMailing Address 101 County Rd
610City
EnterpriseState
ALZip Code
36330Purpose of Disbursement
STORAGE EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.22718

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AAA STORAGEMailing Address 101 County Rd
610City
EnterpriseState
ALZip Code
36330Purpose of Disbursement
STORAGE EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.22721

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AAA STORAGEMailing Address 101 County Rd
610City
EnterpriseState
ALZip Code
36330Purpose of Disbursement
STORAGE EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.22711

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**1800.00****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 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Alabama GOP

Mailing Address 2505 LORNA RD

City
BIRMINGHAMState
ALZip Code
35216Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.22726

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4255 Amon Carter Blvd

City
Ft WorthState
TXZip Code
76155Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

329.48

Transaction ID : SB17.22742

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4255 Amon Carter Blvd

City
Ft WorthState
TXZip Code
76155Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

329.48

Transaction ID : SB17.22743

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

3158.96

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

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4255 Amon Carter Blvd

Date of Disbursement

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

City
Ft WorthState
TXZip Code
76155

FEC Identification Number

CPurpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

329.48

Transaction ID : SB17.22744

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4255 Amon Carter Blvd

Date of Disbursement

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

City
Ft WorthState
TXZip Code
76155

FEC Identification Number

CPurpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

630.48

Transaction ID : SB17.22745

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4255 Amon Carter Blvd

Date of Disbursement

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

City
Ft WorthState
TXZip Code
76155

FEC Identification Number

CPurpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

243.48

Transaction ID : SB17.22764

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1203.44

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

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

PAGE 30 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4255 Amon Carter Blvd

City
Ft WorthState
TXZip Code
76155Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

243.48

Transaction ID : SB17.22765

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AUBURN UNIVERSITY HOTEL

Mailing Address 241 S COLLEGE ST

City
AUBURNState
ALZip Code
36830Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

361.78

Transaction ID : SB17.22709

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AUBURN UNIVERSITY HOTEL

Mailing Address 241 S COLLEGE ST

City
AUBURNState
ALZip Code
36830Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

62.32

Transaction ID : SB17.22710

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

667.58

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 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AX CAPITALMailing Address 555 METRO PLACE N
STE 525City
DUBLINState
OHZip Code
43017Purpose of Disbursement
ACCOUNTING AND COMPLIANCE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1650.00

Transaction ID : SB17.22654

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AX CAPITALMailing Address 555 METRO PLACE N
STE 525City
DUBLINState
OHZip Code
43017Purpose of Disbursement
ACCOUNTING AND COMPLIANCE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

19.90

Transaction ID : SB17.22728

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. AX CAPITALMailing Address 555 METRO PLACE N
STE 525City
DUBLINState
OHZip Code
43017Purpose of Disbursement
ACCOUNTING AND COMPLIANCE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

560.00

Transaction ID : SB17.22656

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

2229.90

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 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Buc-Ee's

Mailing Address 11200 W BROADWAY

Date of Disbursement

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

City
PEARLANDState
TXZip Code
77584

FEC Identification Number

CPurpose of Disbursement
FUEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

51.51

Transaction ID : SB17.22739

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Capitol Hill Club

Mailing Address 300 First St SE

Date of Disbursement

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

City
WashingtonState
DCZip Code
20003

FEC Identification Number

CPurpose of Disbursement
MEALS

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

790.13

Transaction ID : SB17.22668

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Capitol Hill Club

Mailing Address 300 First St SE

Date of Disbursement

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

City
WashingtonState
DCZip Code
20003

FEC Identification Number

CPurpose of Disbursement
MEALS

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

358.80

Transaction ID : SB17.22667

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1200.44

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

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

PAGE 33 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 300 First St SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
MEALS

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

487.50

Transaction ID : SB17.22671

☐ Memo Item**B. CHICKEN AND BISCUITS**

Mailing Address 6747 HWY 27

City
ENTERPRISEState
ALZip Code
36330Purpose of Disbursement
DIGITAL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2750.00

Transaction ID : SB17.22659

☐ Memo Item**C. CHICKEN AND BISCUITS**

Mailing Address 6747 HWY 27

City
ENTERPRISEState
ALZip Code
36330Purpose of Disbursement
DIGITAL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3083.60

Transaction ID : SB17.22658

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

6321.10

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 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CHICKEN AND BISCUITS

Mailing Address 6747 HWY 27

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2025

City
ENTERPRISEState
ALZip Code
36330Purpose of Disbursement
DIGITAL SERVICES

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2400.00

Transaction ID : SB17.22660

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHICKEN AND BISCUITS

Mailing Address 6747 HWY 27

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

City
ENTERPRISEState
ALZip Code
36330Purpose of Disbursement
DIGITAL SERVICES

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2750.00

Transaction ID : SB17.22666

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Cox, Jackie, Curtis, ,

Mailing Address 157 Cliff Road

Date of Disbursement

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

City
BirminghamState
ALZip Code
35147Purpose of Disbursement
FUNDRAISING SERVICES

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2026

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

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

13468.43

Transaction ID : SB17.22701

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

18618.43

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

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

PAGE 35 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Delta

Mailing Address 1030 DELTA BLVD

City
ATLANTAState
GAZip Code
30320Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

89.22

Transaction ID : SB17.22730

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DELTA AIR

Mailing Address 1030 DELTA BLVD

City
ATLANTAState
ALZip Code
30354Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

638.18

Transaction ID : SB17.22763

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA AIR

Mailing Address 1030 DELTA BLVD

City
ATLANTAState
ALZip Code
30354Purpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

679.18

Transaction ID : SB17.22762

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

1406.58

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

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

PAGE 36 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DELTA AIR

Mailing Address 1030 DELTA BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City
ATLANTAState
ALZip Code
30354

FEC Identification Number

CPurpose of Disbursement
TRAVEL FLIGHT EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

628.18

Transaction ID : SB17.22761

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Eastern Shore Republican Club

Mailing Address 191 VIKABTA AVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2025

City
FAIRHOPEState
ALZip Code
36532

FEC Identification Number

CPurpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.22725

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Fundraising, Inc.

Mailing Address 800 W 47th Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2025

City
Kansas CityState
MOZip Code
64112

FEC Identification Number

CPurpose of Disbursement
FUNDRAISING SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17.22729

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1138.18

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

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

PAGE 37 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Google Workspace

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

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

City
Mountain ViweState
CAZip Code
94043

FEC Identification Number

CPurpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

103.50

Transaction ID : SB17.22713

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Google Workspace

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	5

City
Mountain ViweState
CAZip Code
94043

FEC Identification Number

CPurpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1.99

Transaction ID : SB17.22712

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Google Workspace

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

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

City
Mountain ViweState
CAZip Code
94043

FEC Identification Number

CPurpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

117.60

Transaction ID : SB17.22714

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

223.09

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

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

PAGE 38 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Google Workspace

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

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

City
Mountain ViweState
CAZip Code
94043

FEC Identification Number

CPurpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1	9	9							
---	---	---	--	--	--	--	--	--	--

Transaction ID : SB17.22716

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Google Workspace

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

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

City
Mountain ViweState
CAZip Code
94043

FEC Identification Number

CPurpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1	1	7	.	6	0				
---	---	---	---	---	---	--	--	--	--

Transaction ID : SB17.22724

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Google Workspace

Mailing Address 1600 Amphitheatre Parkway

Date of Disbursement

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

City
Mountain ViweState
CAZip Code
94043

FEC Identification Number

CPurpose of Disbursement
COMPUTER SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1	9	9							
---	---	---	--	--	--	--	--	--	--

Transaction ID : SB17.22665

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

1	2	1	.	5	8				
---	---	---	---	---	---	--	--	--	--

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

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

PAGE 39 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Hickman, Rob, , ,

Mailing Address 17 Longleaf Circle

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

City
FairhopeState
ALZip Code
36532

FEC Identification Number

CPurpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1200.00**Transaction ID : SB17.22663**☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Hickman, Rob, , ,

Mailing Address 17 Longleaf Circle

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

City
FairhopeState
ALZip Code
36532

FEC Identification Number

CPurpose of Disbursement
MILEAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

167.30**Transaction ID : SB17.22755**☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. Hickman, Rob, , ,

Mailing Address 17 Longleaf Circle

Date of Disbursement

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

City
FairhopeState
ALZip Code
36532

FEC Identification Number

CPurpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

200.00**Transaction ID : SB17.22676**☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶**1567.30****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)

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Hickman, Rob, , ,

Mailing Address 17 Longleaf Circle

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2025

City
FairhopeState
ALZip Code
36532

FEC Identification Number

CPurpose of Disbursement
MILEAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

377.90**Transaction ID : SB17.22771**☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. HILTON HOTEL

Mailing Address 7930 JONES BRANCH DR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2025

City
MCLEANState
VAZip Code
22102

FEC Identification Number

CPurpose of Disbursement
LODGING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

127.40**Transaction ID : SB17.22703**☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. KIDD, MARK, , ,

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		09		2025

City

State

Zip Code

FEC Identification Number

CPurpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1156.27**Transaction ID : SB17.22673**☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶**1661.57****TOTAL** This Period (last page this line number only).....▶

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LaPrade, Shag, , ,

Mailing Address 204 Morningview Dr

City
EnterpriseState
ALZip Code
36330Purpose of Disbursement
TREASURER SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.22662

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LaPrade, Shag, , ,

Mailing Address 204 Morningview Dr

City
EnterpriseState
ALZip Code
36330Purpose of Disbursement
TREASURER SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.22664

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAIL CHIMP.COM

Mailing Address 675 PONCE DE LEON NE

City
ATLANTAState
GAZip Code
30308Purpose of Disbursement
EMAIL SERVICES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

215.25

Transaction ID : SB17.22715

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**3215.25****TOTAL** This Period (last page this line number only).....▶

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAIL CHIMP.COM

Mailing Address 675 PONCE DE LEON NE

Date of Disbursement

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

City
ATLANTAState
GAZip Code
30308

FEC Identification Number

CPurpose of Disbursement
EMAIL SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

215.25

Transaction ID : SB17.22717

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. MAIL CHIMP.COM

Mailing Address 675 PONCE DE LEON NE

Date of Disbursement

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

City
ATLANTAState
GAZip Code
30308

FEC Identification Number

CPurpose of Disbursement
EMAIL SERVICES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

215.25

Transaction ID : SB17.22722

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. MOORE, FELIX, , ,

Mailing Address 561 CO RD 623

Date of Disbursement

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

City
ENTERPRISEState
ALZip Code
36330

FEC Identification Number

C H8AL02171Purpose of Disbursement
MILEAGE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

256.20

Transaction ID : SB17.22754

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State: AL

District: 02

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

686.70

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

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MOORE, FELIX, , ,

Mailing Address 561 CO RD 623

City
ENTERPRISEState
ALZip Code
36330Purpose of Disbursement
MILEAGE

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	5

FEC Identification Number

C H8AL02171

Amount of Each Disbursement this Period

79.80

Transaction ID : SB17.22756

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MOORE, FELIX, , ,

Mailing Address 561 CO RD 623

City
ENTERPRISEState
ALZip Code
36330Purpose of Disbursement
TRAVEL REIMBURSEMENT

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 02

Date of Disbursement

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

FEC Identification Number

C H8AL02171

Amount of Each Disbursement this Period

14.22

Transaction ID : SB17.22770

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MOORE, HEATHER, , ,

Mailing Address 6747 HIGHWAY 27 S

City
ENTERPRISEState
ALZip Code
36330Purpose of Disbursement
TRAVEL REIMBURSEMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2026
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

415.48

Transaction ID : SB17.22768

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

509.50

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 44 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Nationals Park

Mailing Address 1500 S Capitol St SE

Date of Disbursement

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

City
WashingtonState
DCZip Code
20003

FEC Identification Number

CPurpose of Disbursement
EVENT TICKETS

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3	4	5	.	0	0
---	---	---	---	---	---

Transaction ID : SB17.22720

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. Reynolds, Alex, , ,

Mailing Address 134 Easy Street

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	2	5

City
DothanState
ALZip Code
36305

FEC Identification Number

CPurpose of Disbursement
STRATEGY CONSULTING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

2	5	0	.	0	0
---	---	---	---	---	---

Transaction ID : SB17.22661

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. RIVER BANK AND TRUST

Mailing Address 306 South Main St

Date of Disbursement

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

City
EnterpriseState
ALZip Code
36330

FEC Identification Number

CPurpose of Disbursement
BANK FEES

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

5	9	.	9	9
---	---	---	---	---

Transaction ID : SB17.22646

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2	9	0	.	4	9
---	---	---	---	---	---

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

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. RIVER BANK AND TRUST

Mailing Address 306 South Main St

City
EnterpriseState
ALZip Code
36330Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

59.99

Transaction ID : SB17.22647

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RIVER BANK AND TRUST

Mailing Address 306 South Main St

City
EnterpriseState
ALZip Code
36330Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

59.99

Transaction ID : SB17.22652

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SANDESTIN RESORT

Mailing Address 9300 EMERALD COAST

City
MIRAMAR BEACHState
FLZip Code
32550Purpose of Disbursement
LODGING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.22705

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

619.98

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

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SpringHill Suites

Mailing Address 4978 Montgomery Hwy

Date of Disbursement

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

City
DOTHANState
ALZip Code
36303

FEC Identification Number

CPurpose of Disbursement
LODGING

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1951.65

Transaction ID : SB17.22707

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

B. UBERMailing Address 1455 MARKET ST
STE 400

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94103

FEC Identification Number

CPurpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

30.95

Transaction ID : SB17.22736

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Full Name (Last, First, Middle Initial)

C. UBERMailing Address 1455 MARKET ST
STE 400

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

City
SAN FRANCISCOState
CAZip Code
94103

FEC Identification Number

CPurpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

32.55

Transaction ID : SB17.22737

☐ Memo Item

Office Sought:

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

Disbursement For: 2026

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

State:

District:

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

2015.15

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

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

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

34.46

Transaction ID : SB17.22738

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5.00

Transaction ID : SB17.22734

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. UBERMailing Address 1455 MARKET ST
STE 400City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
TRAVEL CAR EXPENSE

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

29.28

Transaction ID : SB17.22735

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

68.74

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 48 OF 48

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

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NAME OF COMMITTEE (In Full)

BARRY MOORE FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WINRED TECHNICAL SERVICESMailing Address 1776 WILSON BLVD
#530City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

348.42

Transaction ID : SB17.22778

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WINRED TECHNICAL SERVICESMailing Address 1776 WILSON BLVD
#530City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought:

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

Disbursement For: 2026

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

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

260.04

Transaction ID : SB17.22982

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

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

Disbursement For:

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

State:

District:

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).....▶

608.46

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

51946.92