

**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

Montavon for Congress

ADDRESS (number and street)

P.O. Box 17413

Check if different
than previously
reported. (ACC)

Sarasota

FL

34276

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00924787

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

FL

17

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

01

Y Y Y Y

2026

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2026

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

Type or Print Name of Treasurer Mortazavi, Saied, , ,

Signature of Treasurer

Mortazavi, Saied, , ,

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

15

Y Y Y Y

2026

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

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

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Montavon for Congress

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	24176.82	50408.83
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	24176.82	50408.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	17883.45	35060.83
(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))	17883.45	35060.83
8. Cash on Hand at Close of Reporting Period (from Line 27)	40348.00	
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)	25000.00	

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

Montavon for Congress

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

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

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

17800.00

32900.00

(ii) Unitemized

6134.82

9279.82

(iii) TOTAL of contributions
from individuals ▶

23934.82

42179.82

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

0.00

0.00

(d) The Candidate

242.00

8229.01

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

24176.82

50408.83

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

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

10000.00

25000.00

(b) All Other Loans.....

0.00

0.00

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

10000.00

25000.00

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)..... ▶

34176.82

75408.83

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.....	17883.45	35060.83
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	17883.45	35060.83

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	24054.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	34176.82
25. SUBTOTAL (add Line 23 and Line 24).....	58231.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	17883.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	40348.00

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 5 OF 30

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

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)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Castro, Eli, , ,

A.

Mailing Address PO Box 290455

City

Davie

State

FL

Zip Code

33329

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unemployed

Occupation

Unemployed

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 30 2026

Transaction ID : SA11AI.4508

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Christianson, Karen, , ,

B.

Mailing Address 234 Lathrop St

City

Madison

State

WI

Zip Code

53726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Landlord

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4419

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Downie, Bob, , ,

C.

Mailing Address 6315 41st Ct. E.

City

Sarasota

State

FL

Zip Code

34243

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2026

Transaction ID : SA11AI.4655

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

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

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

750.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Downie, Patricia, , ,

A.

Mailing Address 6315 41St Ct E

City

Sarasota

State

FL

Zip Code

34243

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 28 2026

Transaction ID : SA11AI.4656

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

Feser, Elizabeth, , ,

B.

Mailing Address 92 Rogers St

Unit 7

City

Branford

State

CT

Zip Code

06405

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 ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.4647

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

Harrington, Pamela, , ,

C.

Mailing Address 1758 Bay St

City

San Francisco

State

CA

Zip Code

94123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bring Change to Mind

Occupation

Non-Profit Executive Director

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 16 2026

Transaction ID : SA11AI.4551

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Contribution

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

2750.00

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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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Havlik, Hugh A., , ,

A.

Mailing Address 1422 Aken Street

City

Port Charlotte

State

FL

Zip Code

33952

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 ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.4584

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Hendricks, Michael G., , ,

B.

Mailing Address PO Box 920

City

Hood River

State

OR

Zip Code

97031

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 ▼

450.00

Date of Receipt

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

Transaction ID : SA11AI.4614

Amount of Each Receipt this Period

150.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Hoover, Martha B., , ,

C.

Mailing Address 1422 Aken Street

City

Port Charlotte

State

FL

Zip Code

33952

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 ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.4583

Amount of Each Receipt this Period

500.00

☐ Memo Item
Contribution

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

1150.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Logan, Barbara, , ,

A.

Mailing Address 140 Pine Ave

City

Osprey

State

FL

Zip Code

34229

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 20 2026

Transaction ID : SA11AI.4594

Amount of Each Receipt this Period

500.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

McConnell, Judith, , ,

B.

Mailing Address 5229 Greenview Drive

City

Fort Collins

State

CO

Zip Code

80525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 17 2026

Transaction ID : SA11AI.4618

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution

Full Name (Last, First, Middle Initial)

McConnell, Judith, , ,

C.

Mailing Address 5229 Greenview Drive

City

Fort Collins

State

CO

Zip Code

80525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Not Employed

Receipt For: 2026

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 30 2026

Transaction ID : SA11AI.4658

Amount of Each Receipt this Period

150.00

☐ Memo Item

Contribution

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

900.00

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:
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

McConnell, Michael, , ,

A.

Mailing Address 706 Rosin Dr, Chestertown

City

Chestertown

State

MD

Zip Code

21620

FEC ID number of contributing
federal political committee.

C

Name of Employer
Business Manager

Occupation
Self Employed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : SA11AI.4435

Amount of Each Receipt this Period

2500.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Montavon, Michele, , ,

B.

Mailing Address 1216 Norwest Dr

City

Norwood

State

MA

Zip Code

02062

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 ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.4649

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Montavon, Stephanie, , ,

C.

Mailing Address 4950 Nightshade Drive

City

Colorado Springs

State

CO

Zip Code

80919

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 ▼

2000.00

Date of Receipt

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

Transaction ID : SA11AI.4586

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Mowery, John, Franklin, ,

A.

Mailing Address 436 South Shore Dr

City
Osprey

State
FL

Zip Code
34229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mowery Conservation

Occupation
Art Conservator

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 08 2026

Transaction ID : SA11AI.4395

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Mowery, John, Franklin, ,

B.

Mailing Address 436 South Shore Dr

City
Osprey

State
FL

Zip Code
34229

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mowery Conservation

Occupation
Art Conservator

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID : SA11AI.4450

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Remmen, Gary, A, ,

C.

Mailing Address 4480 Calle Serena

City
Sarasota

State
FL

Zip Code
34238

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 ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 26 2026

Transaction ID : SA11AI.4604

Amount of Each Receipt this Period

3500.00

☐ Memo Item
Contribution

4750.00

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:
(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)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Roach, Barbara, , ,

A. Mailing Address 422 Pinewood Lake Dr

City
Venice

State
FL

Zip Code
34285

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 12 2026

Transaction ID : SA11AI.4593

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Rosigno, Richard and Carol, , ,

B. Mailing Address 1707 Kenilworth Strwwtr

City
Sarasota

State
FL

Zip Code
34231

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 ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.4587

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Seatter, Jane, , ,

C. Mailing Address 3255 Sugarloaf Key Rd
Apt 328

City
Punta Gorda

State
FL

Zip Code
33955

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 30 2026

Transaction ID : SA11AI.4659

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

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

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

1500.00

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

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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Simon, Steve, , ,

A.

Mailing Address 19679 Blue Mimosa Lane

City

Venice

State

FL

Zip Code

34292

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unemployed

Occupation

Unemployed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4503

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Spinner, Kathy, , ,

B.

Mailing Address 1175 Tuscany Blvd

City

Venice

State

FL

Zip Code

34292

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unemployed

Occupation

Unemployed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.4448

Amount of Each Receipt this Period

250.00

☐ Memo Item
Contribution

Full Name (Last, First, Middle Initial)

Thayer, Stephen, , ,

C.

Mailing Address 715 Bayshore Dr
Apt 702

City

Fort Lauderdale

State

FL

Zip Code

33304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Unemployed

Occupation

Unemployed

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : SA11AI.4466

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

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

1500.00

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

17800.00

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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☐ 11a	☐ 11b	☐ 11c	☒ 11d	☐ 15
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Montavon, Matthew, , ,

A. Mailing Address P.O. Box 17413

City
SarasotaState
FLZip Code
34276FEC ID number of contributing
federal political committee.

C H4FL17060

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

18229.01

Date of Receipt

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

Transaction ID : SA11D.4927

Amount of Each Receipt this Period

242.00

☐ Memo Item

In kind - fuel and office supplies

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

242.00

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

242.00

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 14 OF 30

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

Montavon, Matthew, , ,

A. Mailing Address P.O. Box 17413

City
Sarasota

State
FL

Zip Code
34276

FEC ID number of contributing
federal political committee.

C H4FL17060

Name of Employer
Retired

Occupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

28229.01

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 22 / 2026

Transaction ID : SA13A.4709

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Bank Transfer to Campaign Account

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

10000.00

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

10000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

109.73

Transaction ID : SB17.4691

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.85

Transaction ID : SB17.4693

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

12.60

Transaction ID : SB17.4695

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

126.18

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

8.23

Transaction ID : SB17.4696

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2.63

Transaction ID : SB17.4697

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

3.36

Transaction ID : SB17.4748

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

14.22

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 17 OF 30

☒ 17	☐ 18	☐ 19a	☐ 19b
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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

76.06

Transaction ID : SB17.4811

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

25.39

Transaction ID : SB17.4812

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Software

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4813

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

401.45

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

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	2	6

FEC Identification Number

C

Amount of Each Disbursement this Period

4.41

Transaction ID : SB17.4858

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Montavon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 17

Date of Disbursement

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

FEC Identification Number

C C00924787

Amount of Each Disbursement this Period

12.25

Transaction ID : SB17.4918

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ActBlue

Mailing Address P.O. Box 44146

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

Candidate Name

Montavon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 17

Date of Disbursement

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

FEC Identification Number

C C00924787

Amount of Each Disbursement this Period

46.73

Transaction ID : SB17.4919

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

63.39

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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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. ActBlue

Mailing Address P.O. Box 44146

Date of Disbursement

M M	D D	Y Y Y Y
03	25	2026

City
SomervilleState
MAZip Code
02144Purpose of Disbursement
Credit Card Processing

003

FEC Identification Number

C C00924787

Amount of Each Disbursement this Period

42.35

Transaction ID : SB17.4920

☐ Memo ItemCandidate Name
Montavon for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 17Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Barthelemy, Harry, , ,

Mailing Address 1140 Kane Mill Lane

Date of Disbursement

M M	D D	Y Y Y Y
03	11	2026

City
BradentonState
FLZip Code
34212Purpose of Disbursement
Payroll

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4874

☐ Memo Item

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Barthelemy, Harry, , ,

Mailing Address 1140 Kane Mill Lane

Date of Disbursement

M M	D D	Y Y Y Y
03	16	2026

City
BradentonState
FLZip Code
34212Purpose of Disbursement
Payroll

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4845

☐ Memo Item

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional).....▶

3042.35

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. CT Embroidery Corp

Mailing Address 137 Meacham Ave

City
ElmontState
NYZip Code
11003Purpose of Disbursement
Embroidery Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

450.76

Transaction ID : SB17.4733

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hirsch, Alison, , ,

Mailing Address 15862 Blue Skies Dr

City
N. Fort MyersState
FLZip Code
33917Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

2055.00

Transaction ID : SB17.4661

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hirsch, Alison, , ,

Mailing Address 15862 Blue Skies Dr

City
N. Fort MyersState
FLZip Code
33917Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2256.00

Transaction ID : SB17.4837

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

4761.76

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Hirsch, Alison, , ,

Mailing Address 15862 Blue Skies Dr

City
N. Fort MyersState
FLZip Code
33917Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2227.00

Transaction ID : SB17.4843

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jacob Mills LLC

Mailing Address 2495 Broad St

City
NokomisState
FLZip Code
34275Purpose of Disbursement
Filming Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4855

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jacob Mills LLC

Mailing Address 2495 Broad St

City
NokomisState
FLZip Code
34275Purpose of Disbursement
Filming Services

Candidate Name

Montavon for Congress

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 17

Date of Disbursement

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

FEC Identification Number

C C00924787

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4924

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

2827.00

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)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Longboat Key Dems

Mailing Address PO Box 8025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		08		2026

City
Longboat KeyState
FLZip Code
34228

FEC Identification Number

C

Purpose of Disbursement
Luncheon - Campaign Opportunity

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

52.55

Transaction ID : SB17.4668

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. Longboat Key Dems

Mailing Address PO Box 8025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2026

City
Longboat KeyState
FLZip Code
34228

FEC Identification Number

C

Purpose of Disbursement
Luncheon - Campaign Opportunity

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

62.99

Transaction ID : SB17.4802

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. Longboat Key Dems

Mailing Address PO Box 8025

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2026

City
Longboat KeyState
FLZip Code
34228

FEC Identification Number

C

Purpose of Disbursement
Luncheon - Campaign Opportunity

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

65.00

Transaction ID : SB17.4803

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

180.54

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Longboat Key Dems

Mailing Address PO Box 8025

Date of Disbursement

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

City
Longboat KeyState
FLZip Code
34228

FEC Identification Number

C	C00924787
---	-----------

Purpose of Disbursement
Luncheon - Campaign Opportunity

007

Amount of Each Disbursement this Period

62.99

Transaction ID : SB17.4912

☐ Memo ItemCandidate Name
Montavon for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 17Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. McCarthy, Carol, , ,Mailing Address 6158 Turnbury Park Dr
#1205

Date of Disbursement

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

City
SarasotaState
FLZip Code
34243

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

2250.33

Transaction ID : SB17.4838

☐ Memo ItemPurpose of Disbursement
PayrollCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. McConnell, Judith, , ,

Mailing Address 5229 Greenview Drive

Date of Disbursement

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

City
Fort CollinsState
COZip Code
80525

FEC Identification Number

C	C00924787
---	-----------

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4910

☐ Memo ItemPurpose of Disbursement
Reimbursement for payment of table at Social Justice event in Venice March

007

Candidate Name
Montavon for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 17Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional).....▶

2613.32

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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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Mellow Mushroom

Mailing Address 6727 Tamiami Trail

City
SarasotaState
FLZip Code
34231Purpose of Disbursement
Food & Beverage

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

22.26

Transaction ID : SB17.4671

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Numero IncMailing Address 695 Town Center Dr
Suite 1100City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

59.95

Transaction ID : SB17.4805

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Numero IncMailing Address 695 Town Center Dr
Suite 1100City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Credit Card Processing

Candidate Name

Montavon for Congress

Office Sought:

☒	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: FL

District: 17

Date of Disbursement

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

FEC Identification Number

C C00924787

Amount of Each Disbursement this Period

3.75

Transaction ID : SB17.4913

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

85.96

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

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

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Numero IncMailing Address 695 Town Center Dr
Suite 1100City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Credit Card Processing

003

Candidate Name
Montavon for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 17Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		17		2026

FEC Identification Number

C C00924787

Amount of Each Disbursement this Period

0.75

Transaction ID : SB17.4914

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Numero IncMailing Address 695 Town Center Dr
Suite 1100City
Costa MesaState
CAZip Code
92626Purpose of Disbursement
Credit Card Processing

003

Candidate Name
Montavon for CongressCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President
State: FL District: 17Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

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

FEC Identification Number

C C00924787

Amount of Each Disbursement this Period

2.82

Transaction ID : SB17.4915

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Ortiz, Gabriella, , ,

Mailing Address 6116 N 23rd Ave

City
St. PetersburgState
FLZip Code
33710Purpose of Disbursement
Campaign Website DesignCategory/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4683

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

1003.57

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. Sir Speedy

Mailing Address 600 Huron Ave

City
Port HuronState
MIZip Code
48060

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

121.40

Transaction ID : SB17.4690

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Socialchamp.com

Mailing Address 2035 Sunset Lake Rd

City
NewarkState
DEZip Code
19702Purpose of Disbursement
Social Media Management

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

240.00

Transaction ID : SB17.4673

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SWFL PrintMailing Address 1925 Trade Center Way
Suite 1City
NaplesState
FLZip Code
34109Purpose of Disbursement
Printing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

249.01

Transaction ID : SB17.4667

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

610.41

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

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

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

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NAME OF COMMITTEE (In Full)

Montavon for Congress

Full Name (Last, First, Middle Initial)

A. SWFL PrintMailing Address 1925 Trade Center Way
Suite 1City
NaplesState
FLZip Code
34109Purpose of Disbursement
Printing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

363.45

Transaction ID : SB17.4682

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SWFL PrintMailing Address 1925 Trade Center Way
Suite 1City
NaplesState
FLZip Code
34109Purpose of Disbursement
Printing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

239.98

Transaction ID : SB17.4800

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Vrbo

Mailing Address 11920 Alterra Pkwy

City
AustinState
TXZip Code
78753Purpose of Disbursement
Lodging

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2026

FEC Identification Number

C

Amount of Each Disbursement this Period

363.47

Transaction ID : SB17.4675

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

966.90

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

16697.05

SCHEDULE C (FEC Form 3)
LOANS

PAGE 28 OF 30

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4111

Montavon for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Montavon, Matthew, , ,

Mailing Address

P.O. Box 17413

City

Sarasota

State

FL

ZIP Code

34276

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

D D / Y Y Y Y
Dec. 2026

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

10000.00

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

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

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

PAGE 29 OF 30

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4112

Montavon for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Montavon, Matthew, , ,

Mailing Address

7448 Ridge Road

City

Sarasota

State

FL

ZIP Code

34238

☒ Personal Funds of the Candidate

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

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

M M / D D / Y Y Y Y

D D / Y Y Y Y
Dec 2026

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

5000.00

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

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

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

PAGE 30 OF 30

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

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4709

Montavon for Congress

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

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

Montavon, Matthew, , ,

Mailing Address

P.O. Box 17413

City

Sarasota

State

FL

ZIP Code

34276

☒ Personal Funds of the Candidate

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 / 22 / 2026

M M / D D / Y Y Y Y

12/31/2026

0.00 % (apr)

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

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

10000.00

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

25000.00

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