

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 DALE STRONG FOR CONGRESS

ADDRESS (number and street) P.O. BOX 18502 HUNTSVILLE AL 35804 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00774281 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT AL 05

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 10 / 01 / 2025 through M M / D D / Y Y Y Y 12 / 31 / 2025

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer MCDANIEL, BEN, , , Signature of Treasurer MCDANIEL, BEN, , , Date M M / D D / Y Y Y Y 01 / 30 / 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.

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

DALE STRONG FOR CONGRESS

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

	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))....	96407.25	839880.85
(b) Total Contribution Refunds (from Line 20(d))	0.00	15200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	96407.25	824680.85
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	117084.96	413285.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	6247.86	6247.86
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	110837.10	407038.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1069842.87	
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).....	240000.00	

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

DALE STRONG FOR CONGRESS

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

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).....	20075.00	435934.18
(ii) Unitemized	332.25	6146.67
(iii) TOTAL of contributions from individuals	20407.25	442080.85
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	76000.00	397800.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	96407.25	839880.85
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.)	6247.86	6247.86
15. OTHER RECEIPTS (Dividends, Interest, etc.)	4846.57	4846.57
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	107501.68	850975.28

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.....	117084.96	413285.98
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	11200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	15200.00
21. OTHER DISBURSEMENTS	10600.00	27150.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	127684.96	455635.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1090026.15
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	107501.68
25. SUBTOTAL (add Line 23 and Line 24).....	1197527.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	127684.96
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1069842.87

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 56	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 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)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ARMSTRONG, CHICK, , ,

Mailing Address 64 WALLAN CT

City FERNANDINA BEACH	State FL	Zip Code 32034-0078
--------------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.22817

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WHITE, DAVID, , ,

Mailing Address 3002 WATCH HILL DR. SE

City OWENS CROSS ROADS	State AL	Zip Code 35763-9710
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FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.22825

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BURTON, PHILIP, , ,

Mailing Address P.O. BOX 16167

City MOBILE	State AL	Zip Code 36616-0167
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FEC ID number of contributing federal political committee.

Name of Employer BURTON PROPERTY GROUP	Occupation PRESIDENT/CEO
---	-----------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.22827

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="3525.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BENEDICT, TERRY, , ,

Mailing Address 2001 N BEAUREGARD ST

City ALEXANDRIA State VA Zip Code 22311-

FEC ID number of contributing federal political committee. C

Name of Employer PLANNING, AND ANALYSIS, INC Occupation PRESIDENT, SYSTEMS

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
10 / 23 / 2025

Transaction ID : SA11A.22830

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BLOOM, HAMILTON, , ,

Mailing Address 7 W MAPLE ST

City ALEXANDRIA State VA Zip Code 22301-

FEC ID number of contributing federal political committee. C

Name of Employer VENTURE GOVERNMENT STRATEGIES Occupation PARTNER

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
10 / 23 / 2025

Transaction ID : SA11A.22832

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PILAND, MARK, , ,

Mailing Address 5353 BAKER LN

City CLOVER State SC Zip Code 29710-

FEC ID number of contributing federal political committee. C

Name of Employer THE ARTEMIS GROUP Occupation GOVERNMENT AFFAIRS

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
10 / 23 / 2025

Transaction ID : SA11A.22833

Amount of Each Receipt this Period
250.00

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 RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 56	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SAWCHAK, RICHARD, , ,

Mailing Address 40003 GRENATA PRESERVE PL

City LEESBURG	State VA	Zip Code 20175-
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FEC ID number of contributing federal political committee.

Name of Employer PLANNING, AND ANALYSIS, INC	Occupation CEO, SYSTEMS
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.22831

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GIBSON, JOHN, , ,

Mailing Address 4507 FISHER COVE LN SE

City OWENS CROSS ROADS	State AL	Zip Code 35763-
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FEC ID number of contributing federal political committee.

Name of Employer BRIGHTHAVEN	Occupation FINANCIAL ADVISOR
---------------------------------	---------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.22836

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE CHICKASAW NATION

Mailing Address P.O. BOX 1548

City ADA	State OK	Zip Code 74820-
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FEC ID number of contributing federal political committee.

Name of Employer	Occupation
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Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.22841

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 8 OF 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DELGADO, MARTIN, P., ,
Mailing Address 12300 SKYLARK LN
City BOWIE State MD Zip Code 20715-2118
FEC ID number of contributing federal political committee. C
Name of Employer S-3 GROUP Occupation LOBBYIST
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
11 / 04 / 2025
Transaction ID : SA11A.22843
Amount of Each Receipt this Period
500.00
 Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PAYNE, CHRIS, , ,
Mailing Address 5837 CARNOUSTIE CT
City AVE MARIA State FL Zip Code 34142-
FEC ID number of contributing federal political committee. C
Name of Employer CROSS POTOMAC CONSULTING Occupation CONSULTANT
Receipt For: 2026
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2025
Transaction ID : SA11A.22844
Amount of Each Receipt this Period
500.00
 Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WHITE, DAVID, , ,
Mailing Address 3002 WATCH HILL DR. SE
City OWENS CROSS ROADS State AL Zip Code 35763-9710
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 ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 08 / 2025
Transaction ID : SA11A.22849
Amount of Each Receipt this Period
25.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1025.00
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: PAGE 9 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HEBERT, MARC, CHRISTOPHER, ,

Mailing Address 1221 DOLPHIN RD

City RIVIERA BEACH State FL Zip Code 33404-2716

FEC ID number of contributing federal political committee. C

Name of Employer JONES WALKER Occupation ATTORNEY

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 18 / 2025

Transaction ID : SA11A.22850

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NESSEL, ARIEL, , ,

Mailing Address PO BOX 1128

City ROSS State CA Zip Code 94957-1128

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation ENTREPRENEUR

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
12 / 02 / 2025

Transaction ID : SA11A.22858

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALEXANDER, THOMAS, , ,

Mailing Address 312 W ALEXANDRIA AVE

City ALEXANDRIA State VA Zip Code 22302-4203

FEC ID number of contributing federal political committee. C

Name of Employer SAILDRONE INC Occupation CGRO

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
12 / 04 / 2025

Transaction ID : SA11A.22865

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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 10 OF 56	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CASH, ALLISON, , ,

Mailing Address 1733 BLAKE BOTTOM RD NW

City HUNTSVILLE	State AL	Zip Code 35806-1259
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FEC ID number of contributing federal political committee.

Name of Employer STRATOLAUNCH	Occupation VP STRAEGY & SOLUTIONS
----------------------------------	--------------------------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.22866

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WHITE, DAVID, , ,

Mailing Address 3002 WATCH HILL DR. SE

City OWENS CROSS ROADS	State AL	Zip Code 35763-9710
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FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.22869

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ARMSTRONG, REBECCA, , ,

Mailing Address 64 WALLAN CT

City FERNANDINA BEACH	State FL	Zip Code 32034-0078
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FEC ID number of contributing federal political committee.

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11A.22874

Amount of Each Receipt this Period

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="3525.00"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LANGLEY, THOMAS, , ,

Mailing Address 23229 SHINNECOCK HILLS DR

City ATHENS State AL Zip Code 35613-1713

FEC ID number of contributing federal political committee. C

Name of Employer LANGLEY CONSULTING, LLC Occupation CONSULTANT

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2025

Transaction ID : SA11A.22894

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HILL, ALAN, , ,

Mailing Address 9911 BARNSBURY CT

City FAIRFAX State VA Zip Code 22031-1003

FEC ID number of contributing federal political committee. C

Name of Employer SELF EMPLOYED Occupation CONSULTING

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
12 / 31 / 2025

Transaction ID : SA11A.22896

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HODGSON, CHRIS, , ,

Mailing Address 800 MAINE AVE SW

City WASHINGTON State DC Zip Code 20024-2805

FEC ID number of contributing federal political committee. C

Name of Employer CORNERSTONE GOVERNMENT AFFAIRS Occupation PRINCIPAL

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
12 / 31 / 2025

Transaction ID : SA11A.22895

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	1250.00
TOTAL This Period (last page this line number only)..... ▶	20075.00

**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 12 OF 56
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GLAUKOS IPAC

Mailing Address ONE GLAUKOS WAY

City ALISO VIEJO State CA Zip Code 92656-2704

FEC ID number of contributing federal political committee. **C** C00825364

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
10 / 01 / 2025

Transaction ID : SA11C.22815

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PERATON PAC

Mailing Address 1875 EXPLORER STREET

City RESTON State VA Zip Code 20190-6277

FEC ID number of contributing federal political committee. **C** C00383992

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
10 / 01 / 2025

Transaction ID : SA11C.22814

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DVA HOLDING COMPANY PAC - FEDERAL

Mailing Address 11 NORTH WATER STREET
SUITE 18290

City MOBILE State AL Zip Code 36602-5018

FEC ID number of contributing federal political committee. **C** C00368902

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 Y Y
10 / 21 / 2025

Transaction ID : SA11C.22828

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
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: PAGE 13 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2025

Transaction ID : SA11C.22829

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2025

Transaction ID : SA11C.22835

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ALTRIA GROUP INC. PAC

Mailing Address 101 CONSTITUTION AVE NW
SUITE 400W

City WASHINGTON State DC Zip Code 20001-

FEC ID number of contributing federal political committee. **C** C00089136

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
11 / 03 / 2025

Transaction ID : SA11C.22838

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 3500.00

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: PAGE 14 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANDURIL INDUSTRIES INC POLITICAL ACTION COMMITTEE

Mailing Address 800 MAINE AVE SW
7TH FLOOR

City WASHINGTON State DC Zip Code 20024-2818

FEC ID number of contributing federal political committee. **C** C00763623

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
11 / 03 / 2025

Transaction ID : SA11C.22842

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FIRST SOLAR INC. PAC

Mailing Address 350 WEST WASHINGTON STREET

City TEMPE State AZ Zip Code 85281-

FEC ID number of contributing federal political committee. **C** C00489534

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
11 / 03 / 2025

Transaction ID : SA11C.22840

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
OSI SYSTEMS INC. PAC

Mailing Address 1252 CHADRON AVE

City HAWTHORNE State CA Zip Code 90250-

FEC ID number of contributing federal political committee. **C** C00414896

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
11 / 03 / 2025

Transaction ID : SA11C.22837

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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: PAGE 15 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCITECH PAC

Mailing Address P.O. BOX 2314

City PRINCETON State NJ Zip Code 08543-2314

FEC ID number of contributing federal political committee. **C** C00859017

Name of Employer Occupation

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
11 / 03 / 2025

Transaction ID : SA11C.22839

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
SCITECH PAC

Mailing Address P.O. BOX 2314

City PRINCETON State NJ Zip Code 08543-2314

FEC ID number of contributing federal political committee. **C** C00859017

Name of Employer Occupation

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
11 / 03 / 2025

Transaction ID : SA11C.22847

Amount of Each Receipt this Period
- 1000.00

Memo Item
CONTRIBUTION
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
SCITECH PAC

Mailing Address P.O. BOX 2314

City PRINCETON State NJ Zip Code 08543-2314

FEC ID number of contributing federal political committee. **C** C00859017

Name of Employer Occupation

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
11 / 03 / 2025

Transaction ID : SA11C.22848

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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: PAGE 16 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1333 NEW HAMPSHIRE AVENUE NW
SUITE 700

City WASHINGTON State DC Zip Code 20036-1532

FEC ID number of contributing federal political committee. **C** C00004275

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
11 / 07 / 2025

Transaction ID : SA11C.22846

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 07 / 2025

Transaction ID : SA11C.22845

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION

Mailing Address 227 S WASHINGTON ST
SUITE 500

City ALEXANDRIA State VA Zip Code 22314-

FEC ID number of contributing federal political committee. **C** C00144766

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
11 / 25 / 2025

Transaction ID : SA11C.22853

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PHARMACEUTICAL RESEARCH & MANUFACTURERS OF AMERICA BETTER GO

Mailing Address 670 MAINE AVE SW
SUITE 1000

City WASHINGTON State DC Zip Code 20024-3556

FEC ID number of contributing federal political committee. **C** C00021972

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
11 / 25 / 2025

Transaction ID : SA11C.22852

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TEXANS FOR JODEY ARRINGTON

Mailing Address 228 S WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00588657

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
12 / 04 / 2025

Transaction ID : SA11C.22861

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 929 LONG BRIDGE DRIVE

City ARLINGTON State VA Zip Code 22202-4208

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
9000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 04 / 2025

Transaction ID : SA11C.22860

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3500.00

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: PAGE 18 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA INC PAC

Mailing Address 325 7TH STREET, NW, SUITE 1000

City WASHINGTON State DC Zip Code 20004-2801

FEC ID number of contributing federal political committee. **C** C00542365

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
12 / 10 / 2025

Transaction ID : SA11C.22873

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BAE SYSTEMS INC. PAC

Mailing Address 2941 FAIRVIEW PARK DRIVE
SUITE 100

City FALLS CHURCH State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 12 / 2025

Transaction ID : SA11C.22871

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NFIB FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 53 CENTURY BLVD
SUITE 300

City NASHVILLE State TN Zip Code 37214-3693

FEC ID number of contributing federal political committee. **C** C00101105

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
12 / 12 / 2025

Transaction ID : SA11C.22870

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 3000.00

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 19 OF 56	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPORTUNITY AND LEADERSHIP ENTERPRISE PAC

Mailing Address 12176 CHANCERY STATION CIRCLE

City RESTON	State VA	Zip Code 20190-5803
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00404392

Name of Employer	Occupation
------------------	------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2025

Transaction ID : SA11C.22872

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION
SEE REDESIGNATION

B. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPORTUNITY AND LEADERSHIP ENTERPRISE PAC

Mailing Address 12176 CHANCERY STATION CIRCLE

City RESTON	State VA	Zip Code 20190-5803
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00404392

Name of Employer	Occupation
------------------	------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2025

Transaction ID : SA11C.22876

Amount of Each Receipt this Period
- 1000.00

Memo Item
CONTRIBUTION
REDESIGNATION TO GENERAL

C. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPORTUNITY AND LEADERSHIP ENTERPRISE PAC

Mailing Address 12176 CHANCERY STATION CIRCLE

City RESTON	State VA	Zip Code 20190-5803
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00404392

Name of Employer	Occupation
------------------	------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2025

Transaction ID : SA11C.22877

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
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 20 OF 56	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 1001 PENNSYLVANIA AVE. NW
SUITE 440

City WASHINGTON State DC Zip Code 20004-2556

FEC ID number of contributing federal political committee. **C** C00010470

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
12 / 17 / 2025

Transaction ID : SA11C.22878

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LEAN FORWARD AMERICA FUND

Mailing Address 502 6TH STREET

City HUDSON State WI Zip Code 54016-1783

FEC ID number of contributing federal political committee. **C** C00869743

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 Y Y
12 / 23 / 2025

Transaction ID : SA11C.22880

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AICPA PAC

Mailing Address PALLADIAN 1 220 LEIGH FARM RD

City DURHAM State NC Zip Code 27707-

FEC ID number of contributing federal political committee. **C** C00077321

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
12 / 23 / 2025

Transaction ID : SA11C.22882

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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 21 OF 56	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1333 NEW HAMPSHIRE AVENUE NW
SUITE 700

City WASHINGTON	State DC	Zip Code 20036-1532
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004275

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
12 / 23 / 2025

Transaction ID : SA11C.22881

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CACI INTERNATIONAL INC POLITICAL ACTION COMMITTEE (CACI PAC)

Mailing Address 800 MAINE AVENUE SW
FLOOR 7

City WASHINGTON	State DC	Zip Code 20024-2818
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00783423

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
12 / 23 / 2025

Transaction ID : SA11C.22883

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CHENEGA CORPORATION PAC (CHENEGA PAC)

Mailing Address 3000 C ST STE 301

City ANCHORAGE	State AK	Zip Code 99503-3975
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FEC ID number of contributing federal political committee. **C** C00549865

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
12 / 23 / 2025

Transaction ID : SA11C.22888

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	6000.00
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 22 OF 56	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CSX CORPORATION GOOD GOVERNMENT FUND

Mailing Address 1331 PENNSYLVANIA AVE
SUITE 560

City WASHINGTON	State DC	Zip Code 20004-1745
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00163832

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
12 / 23 / 2025

Transaction ID : SA11C.22884

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JONES WALKER L.L.P. POLITICAL ACTION COMMITTEE

Mailing Address 201 ST. CHARLES AVENUE
49TH FLOOR

City NEW ORLEANS	State LA	Zip Code 70170-1000
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FEC ID number of contributing federal political committee. **C** C00111534

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
12 / 23 / 2025

Transaction ID : SA11C.22886

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 11250 WAPLES MILL ROAD

City FAIRFAX	State VA	Zip Code 22030-7550
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00053553

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
12 / 23 / 2025

Transaction ID : SA11C.22887

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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: PAGE 23 OF 56
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328-3474

FEC ID number of contributing federal political committee. **C** C00064766

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
12 / 23 / 2025

Transaction ID : SA11C.22885

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WAYNE FARMS LLC POLITICAL ACTION COMMITTEE WAYNE-SANDERSON PAC

Mailing Address 4110 CONTINENTAL DRIVE

City OAKWOOD State GA Zip Code 30566-2800

FEC ID number of contributing federal political committee. **C** C00412445

Name of Employer Occupation

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 23 / 2025

Transaction ID : SA11C.22889

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EMPLOYEES OF RTX CORPORATION PAC

Mailing Address 1000 WILSON BOULEVARD

City ARLINGTON State VA Zip Code 22209-3927

FEC ID number of contributing federal political committee. **C** C00097568

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
12 / 29 / 2025

Transaction ID : SA11C.22891

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 56	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON	State DC	Zip Code 20001-2133
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer	Occupation
------------------	------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 29 / 2025

Transaction ID : SA11C.22890

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ASSOCIATION OF AMERICAN RAILROADS PAC

Mailing Address 425 3RD STREET SW
SUITE 100

City WASHINGTON	State DC	Zip Code 20024-3240
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00280743

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
12 / 31 / 2025

Transaction ID : SA11C.22897

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BNSF RAILPAC

Mailing Address POST OFFICE BOX 961039

City FORT WORTH	State TX	Zip Code 76161-0039
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00235739

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
12 / 31 / 2025

Transaction ID : SA11C.22899

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
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 25 OF 56	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HUNTINGTON INGALLS INDUSTRIES, INC. EMPLOYEES POLITICAL ACTION COMMITTEE (HIIPAC)

Mailing Address 300 M STREET S.E.
SUITE 350

City WASHINGTON	State DC	Zip Code 20003-3436
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00325092

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
12 / 31 / 2025

Transaction ID : SA11C.22901

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL ASPHALT PAVEMENT ASSOCIATION PAC

Mailing Address 800 MAINE AVENUE SE
SUITE 800

City WASHINGTON	State DC	Zip Code 20024-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00444539

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
12 / 31 / 2025

Transaction ID : SA11C.22905

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NORFOLK SOUTHERN CORP. GOOD GOVERNMENT FUND

Mailing Address 1 CONSTITUTION AVE, NE
#300

City WASHINGTON	State DC	Zip Code 20002-5618
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00009282

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
12 / 31 / 2025

Transaction ID : SA11C.22900

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	6500.00
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 56	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
POLARIS INDUSTRIES POLITICAL PARTICIPATION PROGRAM

Mailing Address 2100 HIGHWAY 55

City MEDINA	State MN	Zip Code 55340-9770
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00279497

Name of Employer	Occupation
------------------	------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2025

Transaction ID : SA11C.22902

Amount of Each Receipt this Period

1000.00

Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
POLARIS INDUSTRIES POLITICAL PARTICIPATION PROGRAM

Mailing Address 2100 HIGHWAY 55

City MEDINA	State MN	Zip Code 55340-9770
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00279497

Name of Employer	Occupation
------------------	------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2025

Transaction ID : SA11C.22906

Amount of Each Receipt this Period

4000.00

Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SOUTHEASTERN LUMBER MANUFACTURERS ASSOC POLITICAL ACTION COMMITTEE

Mailing Address 200 GREENCASTLE ROAD

City TYRONE	State GA	Zip Code 30290-2943
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00128678

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
12 / 31 / 2025

Transaction ID : SA11C.22903

Amount of Each Receipt this Period

2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
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 27 OF 56	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SWISHER INTERNATIONAL INC PAC FUND

Mailing Address 459 EAST 16TH STREET

City JACKSONVILLE	State FL	Zip Code 32206-3025
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00312785

Name of Employer	Occupation
------------------	------------

Receipt For: 2026
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2025

Transaction ID : SA11C.22898

Amount of Each Receipt this Period
 _____ 1500.00

Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
THE FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 50 F STREET NW
 SUITE 900

City WASHINGTON	State DC	Zip Code 20001-1530
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00193631

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
 12 / 31 / 2025

Transaction ID : SA11C.22904

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item
 CONTRIBUTION

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

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 4000.00
TOTAL This Period (last page this line number only)..... ▶	_____ 76000.00

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 28 OF 56	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WATERCOLOR INN

Mailing Address 34 GOLDENROD CIR

City SANTA ROSA BEACH	State FL	Zip Code 32459
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA14.123

Amount of Each Receipt this Period

Memo Item
 REFUND: TRAVEL

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

Mailing Address

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

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value="6247.86"/>
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value="6247.86"/>

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

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

FOR LINE NUMBER: PAGE 29 OF 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FIRST NATIONAL BANK

Mailing Address 2101 CLINTON AVE W SUITE 101

City HUNTSVILLE State AL Zip Code 35805

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4846.57

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 24 / 2025

Transaction ID : SA15.123

Amount of Each Receipt this Period
2463.01

Memo Item
INTEREST INCOME

B. Full Name (Last, First, Middle Initial)
FIRST NATIONAL BANK

Mailing Address 2101 CLINTON AVE W SUITE 101

City HUNTSVILLE State AL Zip Code 35805

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4846.57

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 30 / 2025

Transaction ID : SA15.123_B

Amount of Each Receipt this Period
2383.56

Memo Item
INTEREST INCOME

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y 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)..... ▶

4846.57

4846.57

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 56			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2025		
Mailing Address 1340 POYDRAS ST STE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 100.30		
Purpose of Disbursement CREDIT CARD PROCESSING FEES			Transaction ID : SB17.I7899		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. WATERCOLOR INN			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2025		
Mailing Address 34 GOLDENROD CIRCLE			FEC Identification Number C		
City SANTA ROSA BEACH	State FL	Zip Code 32459	Amount of Each Disbursement this Period 6247.86		
Purpose of Disbursement TRAVEL			Transaction ID : SB17.I7933		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2025		
Mailing Address 1340 POYDRAS ST STE 1770			FEC Identification Number C		
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 1.30		
Purpose of Disbursement CREDIT CARD PROCESSING FEES			Transaction ID : SB17.I7900		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6349.46
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 Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BRAD PRESNALL			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2025	
Mailing Address 153 FAYE DR. SE			FEC Identification Number C	
City DECATUR	State AL	Zip Code 35603	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING			Transaction ID : SB17.I7912	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. FIRST NATIONAL BANK			Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2025	
Mailing Address ONE NORTH SHORE CENTER			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 15212-1521	Amount of Each Disbursement this Period 18.50	
Purpose of Disbursement BANK FEE			Transaction ID : SB17.I7925	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. MAIN STREET STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2025	
Mailing Address P.O. BOX 2032			FEC Identification Number C	
City HUNTSVILLE	State AL	Zip Code 35802	Amount of Each Disbursement this Period 10000.00	
Purpose of Disbursement POLITICAL STRATEGY CONSULTING			Transaction ID : SB17.I7931	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	13518.50
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 Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SMITH, DYLAN, , ,		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2025
Mailing Address 170 GRAPHICS DRIVE UNIT 4108		FEC Identification Number C
City MADISON	State AL	Zip Code 35758
Purpose of Disbursement MILEAGE / FOOD / BEVERAGE (ALL ITEMS BELOW ITEMIZATION THRESHOLD)		Amount of Each Disbursement this Period 534.21
Candidate Name		Transaction ID : SB17.I7952
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address ONE NORTH SHORE CENTER		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15212-1521
Purpose of Disbursement CREDIT CARD PAYMENT		Amount of Each Disbursement this Period 702.69
Candidate Name		Transaction ID : SB17.I7943
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2025
Mailing Address 300 1ST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD / BEVERAGE		Amount of Each Disbursement this Period 397.07
Candidate Name		Transaction ID : SB17.I7956
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1236.90
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MULLINS SPECIAL OCCASIONS

Mailing Address 1021 MERIDIAN ST N

City HUNTSVILLE State AL Zip Code 35801

Purpose of Disbursement REFUND - EQUIPMENT RENTAL

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
10 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: - 29.58

Transaction ID : SB17.I7954

Memo Item

Full Name (Last, First, Middle Initial)

B. RENAISSANCE BATTLE HOUSE

Mailing Address 26 N ROYAL ST

City MOBILE State AL Zip Code 36602

Purpose of Disbursement TRAVEL

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
10 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 310.20

Transaction ID : SB17.I7955

Memo Item

Full Name (Last, First, Middle Initial)

C. THE CONGRESSIONAL CLUB MUSEUM AND FOUNDATION

Mailing Address 2001 NEW HAMPSHIRE AVE NW

City WASHINGTON State DC Zip Code 20009

Purpose 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
10 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 25.00

Transaction ID : SB17.I7953

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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 Page

FOR LINE NUMBER:
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. CROSBY OTTENHOFF GROUP

Mailing Address 421 OFFICE PARK DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement
COMPLIANCE CONSULTING

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
10 / 22 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
6293.75

Transaction ID : SB17.I7918

Memo Item

Full Name (Last, First, Middle Initial)
B. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

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
10 / 28 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
30.60

Transaction ID : SB17.I7901

Memo Item

Full Name (Last, First, Middle Initial)
C. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE 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
10 / 28 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
1000.00

Transaction ID : SB17.I7915

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 7324.35

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 Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2025
Mailing Address ONE NORTH SHORE CENTER		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15212-1521
Purpose of Disbursement CREDIT CARD PAYMENT	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 239.74	
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) ▼	Transaction ID : SB17.I7944
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2025
Mailing Address 300 1ST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD / BEVERAGE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 239.74	
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) ▼	Transaction ID : SB17.I7957
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2025
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 20.30	
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) ▼	Transaction ID : SB17.I7902
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	260.04
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 Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

A. STRONG, DALE, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 247 SPANO ROAD

City MADISON State AL Zip Code 35757

Purpose of Disbursement CAMPAIGN APPAREL/TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2129.21

Transaction ID : SB17.I7950

Memo Item

B. APPAREL4PRINT.COM

Full Name (Last, First, Middle Initial)

Mailing Address 5090 RICHMOND AVE

City HOUSTON State TX Zip Code 77030

Purpose of Disbursement CAMPAIGN APPAREL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 2101.30

Transaction ID : SB17.I7972

Memo Item

C. UBER

Full Name (Last, First, Middle Initial)

Mailing Address 1725 3RD STREET

City SAN FRANCISCO State CA Zip Code 94158

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 27.91

Transaction ID : SB17.I7973

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 2129.21

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 Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2025	
Mailing Address 1340 POYDRAS ST STE 1770			FEC Identification Number C	
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 40.60	
Purpose of Disbursement CREDIT CARD PROCESSING FEES			Transaction ID : SB17.I7903	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. FIRST NATIONAL BANK			Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2025	
Mailing Address ONE NORTH SHORE CENTER			FEC Identification Number C	
City PITTSBURGH	State PA	Zip Code 15212-1521	Amount of Each Disbursement this Period 429.66	
Purpose of Disbursement CREDIT CARD PAYMENT			Transaction ID : SB17.I7945	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 11 / 11 / 2025	
Mailing Address 1 SKYVIEW DR.			FEC Identification Number C	
City FORT WORTH	State TX	Zip Code 75261	Amount of Each Disbursement this Period 429.66	
Purpose of Disbursement TRAVEL			Transaction ID : SB17.I7958	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	470.26
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 Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 56			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2025
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Amount of Each Disbursement this Period 1.30
Candidate Name		Transaction ID : SB17.I7904
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. BRAD PRESNALL		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2025
Mailing Address 153 FAYE DR. SE		FEC Identification Number C
City DECATUR	State AL	Zip Code 35603
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period 3500.00
Candidate Name		Transaction ID : SB17.I7913
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2025
Mailing Address ONE NORTH SHORE CENTER		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15212-1521
Purpose of Disbursement BANK FEE		Amount of Each Disbursement this Period 18.50
Candidate Name		Transaction ID : SB17.I7926
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3519.80
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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ALLIED PRINTING

Mailing Address 1821 UNIVERSITY DR. NW

City HUNTSVILLE State AL Zip Code 35801

Purpose of Disbursement PRINTING Category/Type

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
11 / 20 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
1002.80

Transaction ID : SB17.I7898

Memo Item

Full Name (Last, First, Middle Initial)

B. CROSBY OTTENHOFF GROUP

Mailing Address 421 OFFICE PARK DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement COMPLIANCE CONSULTING Category/Type

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
11 / 20 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
7022.50

Transaction ID : SB17.I7919

Memo Item

Full Name (Last, First, Middle Initial)

C. FUNDRAISING, INC.

Mailing Address 800 W 47TH STREET
SUITE 200

City KANSAS CITY State MO Zip Code 64112

Purpose of Disbursement DELIVERY SERVICE Category/Type

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
11 / 20 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
43888.57

Transaction ID : SB17.I7928

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 51913.87

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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 20.30

Transaction ID : SB17.I7905

Memo Item

Full Name (Last, First, Middle Initial)

B. THE CONGRESSIONAL CLUB MUSEUM AND FOUNDATION

Mailing Address 2001 NEW HAMPSHIRE AVE NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement FOOD / BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 45.00

Transaction ID : SB17.I7932

Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST NATIONAL BANK

Mailing Address ONE NORTH SHORE CENTER

City PITTSBURGH State PA Zip Code 15212-1521

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 24 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 515.45

Transaction ID : SB17.I7946

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 580.75

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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. CAPITOL HILL CLUB

Mailing Address 300 1ST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose 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
11 / 24 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
515.45

Transaction ID : SB17.I7959

Memo Item

Full Name (Last, First, Middle Initial)
B. CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE 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
11 / 25 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
1000.00

Transaction ID : SB17.I7916

Memo Item

Full Name (Last, First, Middle Initial)
C. LMA PRODUCTIONS INC.

Mailing Address 320 OLD HICKORY BLVD

City NASHVILLE State TN Zip Code 37221

Purpose of Disbursement
DONOR GIFTS

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
12 / 01 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
3570.00

Transaction ID : SB17.I7930

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 4570.00

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 Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2025
Mailing Address ONE NORTH SHORE CENTER		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15212-1521
Purpose of Disbursement CREDIT CARD PAYMENT	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 278.50	
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) ▼	Transaction ID : SB17.I7947
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2025
Mailing Address 300 1ST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FOOD / BEVERAGE	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 228.50	
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) ▼	Transaction ID : SB17.I7960
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2025
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEES	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 80.30	
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) ▼	Transaction ID : SB17.I7906
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	358.80
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 Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2025
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Amount of Each Disbursement this Period 20.30
Candidate Name		Transaction ID : SB17.I7907
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2025
Mailing Address ONE NORTH SHORE CENTER		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15212-1521
Purpose of Disbursement CREDIT CARD PAYMENT		Amount of Each Disbursement this Period 998.40
Candidate Name		Transaction ID : SB17.I7948
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2025
Mailing Address 475 L'ENFANT PLAZA SW		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20260
Purpose of Disbursement POSTAGE		Amount of Each Disbursement this Period 998.40
Candidate Name		Transaction ID : SB17.I7962
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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1018.70
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 Page

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2025
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Amount of Each Disbursement this Period 44.60
Candidate Name		Transaction ID : SB17.I7908
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2025
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Amount of Each Disbursement this Period 1.30
Candidate Name		Transaction ID : SB17.I7909
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BRAD PRESNALL		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2025
Mailing Address 153 FAYE DR. SE		FEC Identification Number C
City DECATUR	State AL	Zip Code 35603
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Amount of Each Disbursement this Period 3500.00
Candidate Name		Transaction ID : SB17.I7914
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	3545.90
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FIRST NATIONAL BANK

Mailing Address ONE NORTH SHORE CENTER

City PITTSBURGH State PA Zip Code 15212-1521

Purpose of Disbursement BANK FEE Category/Type

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
12 / 15 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
18.50
Transaction ID : SB17.I7927

Memo Item

Full Name (Last, First, Middle Initial)

B. STRONG, DALE, , ,

Mailing Address 247 SPANO ROAD

City MADISON State AL Zip Code 35757

Purpose of Disbursement TRAVEL Category/Type

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
12 / 16 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
42.48
Transaction ID : SB17.I7951

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER

Mailing Address 1725 3RD STREET

City SAN FRANCISCO State CA Zip Code 94158

Purpose of Disbursement TRAVEL Category/Type

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
12 / 16 / 2025

FEC Identification Number
C

Amount of Each Disbursement this Period
42.48
Transaction ID : SB17.I7974

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 60.98

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 Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CROSBY OTTENHOFF GROUP			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2025
Mailing Address 421 OFFICE PARK DRIVE			FEC Identification Number C
City MOUNTAIN BROOK	State AL	Zip Code 35223	Amount of Each Disbursement this Period 4703.75
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type	Transaction ID : SB17.I7920
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. FUNDRAISING, INC.			Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2025
Mailing Address 800 W 47TH STREET SUITE 200			FEC Identification Number C
City KANSAS CITY	State MO	Zip Code 64112	Amount of Each Disbursement this Period 10004.94
Purpose of Disbursement TRAVEL / FOOD / BEVERAGE / DELIVERY SERVICE		Category/ Type	Transaction ID : SB17.I7929
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. ANEDOT			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2025
Mailing Address 1340 POYDRAS ST STE 1770			FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112	Amount of Each Disbursement this Period 104.60
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Category/ Type	Transaction ID : SB17.I7910
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	14813.29
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 Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 56			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2025
Mailing Address 1593 SPRING HILL ROAD SUITE 400		FEC Identification Number C
City TYSONS CORNER	State VA	Zip Code 22182
Purpose of Disbursement DATABASE MANAGEMENT	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1200.00	
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) ▼	Transaction ID : SB17.I7917
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. FIRST NATIONAL BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2025
Mailing Address ONE NORTH SHORE CENTER		FEC Identification Number C
City PITTSBURGH	State PA	Zip Code 15212-1521
Purpose of Disbursement CREDIT CARD PAYMENT	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 4092.91	
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) ▼	Transaction ID : SB17.I7949
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ALABAMA PRINT AND MAIL		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2025
Mailing Address P.O. BOX 481		FEC Identification Number C
City DECATUR	State AL	Zip Code 35602
Purpose of Disbursement PRINTING	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 153.84	
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) ▼	Transaction ID : SB17.I7964
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	5292.91
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 Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. AMERICAN AIRLINES

Mailing Address 1 SKYVIEW DR.

City FORT WORTH State TX Zip Code 75261

Purpose of Disbursement TRAVEL

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
12 / 30 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 1082.95

Transaction ID : SB17.I7969

Memo Item

Full Name (Last, First, Middle Initial)
B. CAPITOL HILL CLUB

Mailing Address 300 1ST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose 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
12 / 30 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 366.98

Transaction ID : SB17.I7966

Memo Item

Full Name (Last, First, Middle Initial)
C. DELTA

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement TRAVEL

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
12 / 30 / 2025

FEC Identification Number: C

Amount of Each Disbursement this Period: 339.18

Transaction ID : SB17.I7967

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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 Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ETSY			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2025	
Mailing Address 117 ADAMS STREET			FEC Identification Number C	
City NEW YORK	State NY	Zip Code 11201	Amount of Each Disbursement this Period 422.41	
Purpose of Disbursement DONOR GIFTS		Category/ Type	Transaction ID : SB17.I7970	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2025	
Mailing Address 475 L'ENFANT PLAZA SW			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20260	Amount of Each Disbursement this Period 290.35	
Purpose of Disbursement POSTAGE		Category/ Type	Transaction ID : SB17.I7971	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. WHITE HOUSE HISTORICAL ASSOCIATION			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2025	
Mailing Address P.O. BOX 27264			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20038	Amount of Each Disbursement this Period 1240.00	
Purpose of Disbursement DONOR GIFTS		Category/ Type	Transaction ID : SB17.I7968	
Candidate Name			<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 56	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANEDOT		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2025
Mailing Address 1340 POYDRAS ST STE 1770		FEC Identification Number C
City NEW ORLEANS	State LA	Zip Code 70112
Purpose of Disbursement CREDIT CARD PROCESSING FEES		Amount of Each Disbursement this Period 50.90
Candidate Name		Transaction ID : SB17.I7911
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	50.90
TOTAL This Period (last page this line number only).....▶	117014.62

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
17 18 19a 19b
20a 20b 20c 21
PAGE 51 OF 56

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. MADISON COUNTY REPUBLICANS EXECUTIVE COMM
Mailing Address 18 ST JAMES SQUARE
City HUNTSVILLE State AL Zip Code 35801
Purpose of Disbursement SPONSORSHIP
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
10 / 22 / 2025
FEC Identification Number
C
Amount of Each Disbursement this Period
2600.00
Transaction ID : **SB21.I7939**
 Memo Item

Full Name (Last, First, Middle Initial)
B. BRIAN FITZPATRICK FOR ALL OF US
Mailing Address PO BOX 939
City LANGHORNE State PA Zip Code 19047
Purpose of Disbursement CONTRIBUTION EXPENSE
Candidate Name FITZPATRICK, BRIAN, , ,
Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: PA District: 01

Date of Disbursement
M M / D D / Y Y Y Y
12 / 03 / 2025
FEC Identification Number
C C00607416
Amount of Each Disbursement this Period
1000.00
Transaction ID : **SB21.I7935**
 Memo Item

Full Name (Last, First, Middle Initial)
C. COLE FOR CONGRESS
Mailing Address P.O. BOX 722256
City NORMAN State OK Zip Code 73070
Purpose of Disbursement CONTRIBUTION EXPENSE
Candidate Name COLE, TOM, , ,
Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼
State: OK District: 04

Date of Disbursement
M M / D D / Y Y Y Y
12 / 03 / 2025
FEC Identification Number
C C00379735
Amount of Each Disbursement this Period
2000.00
Transaction ID : **SB21.I7936**
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 5600.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 56	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. LAWLER FOR CONGRESS, INC.

Mailing Address PO BOX 137

City CHAPPAQUA State NY Zip Code 10514

Purpose of Disbursement CONTRIBUTION EXPENSE

Candidate Name LAWLER, MICHAEL, VINCENT, ,

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼

State: NY District: 17

Date of Disbursement: 12 / 03 / 2025

FEC Identification Number: C C00815415

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.I7938

Memo Item

Full Name (Last, First, Middle Initial)
B. PATRIOTS FOR PERRY

Mailing Address 4075 LINGLESTOWN ROAD
PMB 119

City HARRISBURG State PA Zip Code 17112

Purpose of Disbursement CONTRIBUTION EXPENSE

Candidate Name PERRY, SCOTT, , ,

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼

State: PA District: 10

Date of Disbursement: 12 / 03 / 2025

FEC Identification Number: C C00510164

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.I7940

Memo Item

Full Name (Last, First, Middle Initial)
C. ROB FOR PA

Mailing Address 11 DOCK ST BOX 971

City PITTSTON State PA Zip Code 18640

Purpose of Disbursement CONTRIBUTION EXPENSE

Candidate Name BRESNAHAN, ROB, , ,

Office Sought: House Senate President
Disbursement For: 2026 Primary General Other (specify) ▼

State: PA District: 08

Date of Disbursement: 12 / 03 / 2025

FEC Identification Number: C C00852137

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB21.I7941

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 3000.00

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 Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 56
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DALE STRONG FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VAN ORDEN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2025
Mailing Address PO BOX 1836		FEC Identification Number C C00742007
City LA CROSSE	State WI	Zip Code 54602
Purpose of Disbursement CONTRIBUTION EXPENSE		Amount of Each Disbursement this Period 1000.00
Candidate Name VAN ORDEN, DERRICK, F., MR.,	Category/Type	Transaction ID : SB21.I7942
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) ▼	<input type="checkbox"/> Memo Item
State: WI District: 03		

Full Name (Last, First, Middle Initial) B. COMMITTEE TO ELECT MIKE EZELL		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2025
Mailing Address P.O. BOX 17784		FEC Identification Number C C00776393
City HATTIESBURG	State MS	Zip Code 39404
Purpose of Disbursement CONTRIBUTION EXPENSE		Amount of Each Disbursement this Period 1000.00
Candidate Name EZELL, WALTER, MICHAEL, ,	Category/Type	Transaction ID : SB21.I7937
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) ▼	<input type="checkbox"/> Memo Item
State: MS District: 04		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	10600.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DALE STRONG FOR CONGRESS** Transaction ID : **L021121**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
STRONG, DALE, WHITNEY, ,			<input checked="" type="checkbox"/> Primary
Mailing Address P.O. BOX 18502			<input type="checkbox"/> General
			<input type="checkbox"/> Other (specify) ▼
City HUNTSVILLE	State AL	ZIP Code 35804	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 40000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 40000.00
-------------------------------------	------------------------------------	---

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	02 / 11 / 2021	NONE	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	40000.00
TOTALS This Period (last page in this line only).....▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DALE STRONG FOR CONGRESS** Transaction ID : **L021122**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
STRONG, DALE, WHITNEY, ,			<input checked="" type="checkbox"/> Primary
Mailing Address P.O. BOX 18502			<input type="checkbox"/> General
			<input type="checkbox"/> Other (specify) ▼
City HUNTSVILLE	State AL	ZIP Code 35804	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 150000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 150000.00
--------------------------------------	------------------------------------	--

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 04 / 26 / 2022	M M / D D / Y Y Y Y NONE	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	150000.00
TOTALS This Period (last page in this line only).....▶	

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

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **DALE STRONG FOR CONGRESS** Transaction ID : **L021123**

LOAN SOURCE Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2022
STRONG, DALE, WHITNEY, ,			<input type="checkbox"/> Primary
Mailing Address P.O. BOX 18502			<input checked="" type="checkbox"/> General
City HUNTSVILLE		State AL	ZIP Code 35804
			<input checked="" type="checkbox"/> Personal Funds of the Candidate
			<input type="checkbox"/> Other (specify) ▼

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	06 / 24 / 2022	NONE	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).....▶	50000.00
TOTALS This Period (last page in this line only).....▶	240000.00

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