



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Hach for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2026 To: M M / D D / Y Y Y Y 03 / 31 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	<span style="border: 1px solid black; padding: 2px;">15226.36</span>	<span style="border: 1px solid black; padding: 2px;">25485.65</span>
(b) Total Contribution Refunds (from Line 20(d)) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	<span style="border: 1px solid black; padding: 2px;">15226.36</span>	<span style="border: 1px solid black; padding: 2px;">25485.65</span>
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	<span style="border: 1px solid black; padding: 2px;">199197.70</span>	<span style="border: 1px solid black; padding: 2px;">267748.80</span>
(b) Total Offsets to Operating Expenditures (from Line 14) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	<span style="border: 1px solid black; padding: 2px;">199197.70</span>	<span style="border: 1px solid black; padding: 2px;">267748.80</span>
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<span style="border: 1px solid black; padding: 2px;">266972.79</span>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<span style="border: 1px solid black; padding: 2px;">710000.00</span>	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Hach 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).....	14538.66	23418.16
(ii) Unitemized.....	687.70	2067.49
(iii) TOTAL of contributions from individuals ▶	15226.36	25485.65
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	15226.36	25485.65
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	150000.00	500000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	150000.00	500000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	12.87
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	165226.36	525498.52

**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.....	199197.70	267748.80
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	199197.70	267748.80

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	300944.13
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	165226.36
25. SUBTOTAL (add Line 23 and Line 24).....	466170.49
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	199197.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	266972.79

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 31  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Bryden, Elizabeth, M., ,

Mailing Address One West 67th Street

City New York City State NY Zip Code 10023

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation retired

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 20 / 2026

Transaction ID : SA11AI.4759

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Bryden, Elizabeth, M., ,

Mailing Address One West 67th Street

City New York City State NY Zip Code 10023

FEC ID number of contributing federal political committee. C

Name of Employer n/a Occupation retired

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2026

Transaction ID : SA11AI.4817

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Daniels, Tara, A., ,

Mailing Address 4 Barracuda Road

City East Quogue State NY Zip Code 11942

FEC ID number of contributing federal political committee. C

Name of Employer Kiddie Fit Community Preschool Occupation director of operations

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
260.25

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 21 / 2026

Transaction ID : SA11AI.4768

Amount of Each Receipt this Period  
260.25

Memo Item  
Earmarked-> WinRed

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

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

1010.25

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 31	
	<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)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
WinRed

Mailing Address P.O. Box 9891

City: Arlington State: TX Zip Code: 22219

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4143.25

Date of Receipt: 02 / 25 / 2026

**Transaction ID : SA11AI.4768.0**

Amount of Each Receipt this Period: 260.25

Memo Item  
earmarks received

**B.** Full Name (Last, First, Middle Initial)  
Fruhling, Michael, , ,

Mailing Address 111 Broadway

City: New York State: NY Zip Code: 10006

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

Name of Employer: Occupation:  
Gersowitz Libo Korek attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
520.51

Date of Receipt: 03 / 25 / 2026

**Transaction ID : SA11AI.4805**

Amount of Each Receipt this Period: 520.51

Memo Item  
Earmarked-> WinRed

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

Mailing Address P.O. Box 9891

City: Arlington State: TX Zip Code: 22219

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5180.17

Date of Receipt: 03 / 27 / 2026

**Transaction ID : SA11AI.4805.0**

Amount of Each Receipt this Period: 520.51

Memo Item  
earmarks received

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	520.51
<b>TOTAL</b> 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 7 OF 31  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Gentilli, Robert, , ,

Mailing Address 260 West Broadway

City Long Beach State NY Zip Code 11561

FEC ID number of contributing federal political committee. C

Name of Employer self-employed Occupation financial advisor

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
520.51

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2026

Transaction ID : SA11AI.4811

Amount of Each Receipt this Period  
520.51

Memo Item  
Earmarked-> WinRed

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

Mailing Address P.O. Box 9891

City Arlington State TX Zip Code 22219

FEC ID number of contributing federal political committee. C C00694323

Name of Employer Occupation

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9355.27

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 30 / 2026

Transaction ID : SA11AI.4811.0

Amount of Each Receipt this Period  
520.51

Memo Item  
earmarks received

**C.** Full Name (Last, First, Middle Initial)  
Kilfoil, James, , ,

Mailing Address 509 E. 88th Street #4C

City New York State NY Zip Code 10128

FEC ID number of contributing federal political committee. C

Name of Employer Blue Castle Services, LLC Occupation private investigator

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
208.20

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 01 / 2026

Transaction ID : SA11AI.4744

Amount of Each Receipt this Period  
52.05

Memo Item  
Earmarked-> WinRed

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 572.56

**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 8 OF 31	
	<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)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
WinRed

Mailing Address P.O. Box 9891

City: Arlington State: TX Zip Code: 22219

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3684.66

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 05 / 2026

**Transaction ID : SA11AI.4744.0**

Amount of Each Receipt this Period  
52.05

Memo Item  
earmarks received

**B.** Full Name (Last, First, Middle Initial)  
Kilfoil, James, , ,

Mailing Address 509 E. 88th Street  
#4C

City: New York State: NY Zip Code: 10128

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

Name of Employer: Occupation:  
Blue Castle Services, LLC private investigator

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
260.25

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2026

**Transaction ID : SA11AI.4803**

Amount of Each Receipt this Period  
52.05

Memo Item  
Earmarked-> WinRed

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

Mailing Address P.O. Box 9891

City: Arlington State: TX Zip Code: 22219

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7834.76

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2026

**Transaction ID : SA11AI.4803.0**

Amount of Each Receipt this Period  
52.05

Memo Item  
earmarks received

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	52.05
<b>TOTAL</b> 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 31  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Lang, Edward, , ,

Mailing Address P.O. Box 485

City: Narrowsburg State: NY Zip Code: 12764

FEC ID number of contributing federal political committee: C

Name of Employer: n/a Occupation: unemployed

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 30 / 2026

Transaction ID : SA11AI.4823

Amount of Each Receipt this Period: 1000.00

Memo Item  
Earmarked-> WinRed

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

Mailing Address P.O. Box 9891

City: Arlington State: TX Zip Code: 22219

FEC ID number of contributing federal political committee: C C00694323

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 10667.57

Date of Receipt: 03 / 31 / 2026

Transaction ID : SA11AI.4823.0

Amount of Each Receipt this Period: 1000.00

Memo Item  
earmarks received

**C.** Full Name (Last, First, Middle Initial)  
Mirman, Michele, , ,

Mailing Address 291 Broadway

City: New York State: NY Zip Code: 10007

FEC ID number of contributing federal political committee: C

Name of Employer: Mirman, Markovits Landau Occupation: attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date: 2602.54

Date of Receipt: 03 / 25 / 2026

Transaction ID : SA11AI.4804

Amount of Each Receipt this Period: 2602.54

Memo Item  
Earmarked-> WinRed

**SUBTOTAL** of Receipts This Page (optional).....▶ 3602.54

**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 31	
	<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)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
WinRed

Mailing Address P.O. Box 9891

City: Arlington State: TX Zip Code: 22219

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
7782.71

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 27 / 2026

**Transaction ID : SA11AI.4804.0**

Amount of Each Receipt this Period  
2602.54

Memo Item  
earmarks received

**B.** Full Name (Last, First, Middle Initial)  
O'Toole, Daniel, , ,

Mailing Address 200 Amsterdam Avenue

City: New York State: NY Zip Code: 10023

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

Name of Employer: Occupation:  
Block O'Toole Murphy LLP attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
260.25

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 28 / 2026

**Transaction ID : SA11AI.4825**

Amount of Each Receipt this Period  
260.25

Memo Item  
Earmarked-> WinRed

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

Mailing Address P.O. Box 9891

City: Arlington State: TX Zip Code: 22219

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
9615.52

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 31 / 2026

**Transaction ID : SA11AI.4825.0**

Amount of Each Receipt this Period  
260.25

Memo Item  
earmarks received

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	260.25
<b>TOTAL</b> 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 11 OF 31	
	<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)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Salat, Richard, , ,

Mailing Address 1 Miro Place

City Port Washington	State NY	Zip Code 11050
-------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation retired
-------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
260.25

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 01 / 2026

**Transaction ID : SA11AI.4734**

Amount of Each Receipt this Period  
260.25

Memo Item  
Earmarked-> WinRed

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

Mailing Address P.O. Box 9891

City Arlington	State TX	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3503.51

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 02 / 2026

**Transaction ID : SA11AI.4734.0**

Amount of Each Receipt this Period  
260.25

Memo Item  
earmarks received

**C.** Full Name (Last, First, Middle Initial)  
Salat, Richard, , ,

Mailing Address 1 Miro Place

City Port Washington	State NY	Zip Code 11050
-------------------------	-------------	-------------------

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

Name of Employer n/a	Occupation retired
-------------------------	-----------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
520.50

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 12 / 2026

**Transaction ID : SA11AI.4792**

Amount of Each Receipt this Period  
260.25

Memo Item  
Earmarked-> WinRed

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	520.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 31	
	<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)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
WinRed

Mailing Address P.O. Box 9891

City Arlington	State TX	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4633.63

Date of Receipt  

M M / D D / Y Y Y Y Y Y
03 / 16 / 2026

**Transaction ID : SA11AI.4792.0**

Amount of Each Receipt this Period  
260.25

Memo Item  
earmarks received

**B.** Full Name (Last, First, Middle Initial)  
Spaier, Matthew, , ,

Mailing Address 306 E. Mosholu Parkway, S.

City Bronx	State NY	Zip Code 10458
---------------	-------------	-------------------

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

Name of Employer Satellite Investigations	Occupation president
--	-------------------------

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

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

**Transaction ID : SA11AI.4810**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Earmarked-> WinRed

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

Mailing Address P.O. Box 9891

City Arlington	State TX	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2026  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
8834.76

Date of Receipt  

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

**Transaction ID : SA11AI.4810.0**

Amount of Each Receipt this Period  
1000.00

Memo Item  
earmarks received

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1000.00
<b>TOTAL</b> 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 31  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Taylor, Margaretta, J., ,

Mailing Address 2 Sutton Square

City New York State NY Zip Code 10022

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

Name of Employer n/a Occupation retired

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
14000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 25 2026

Transaction ID : SA11AI.4815

Amount of Each Receipt this Period  
7000.00

Memo Item  
retribution requested

**B.** 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

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	14538.66

# 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 31  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
**Hach for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Hach, Gregory, , ,

Mailing Address 338 Jericho Pkwy.  
#212

City Syosset State NY Zip Code 11791

FEC ID number of contributing federal political committee. **C** H4NY03192

Name of Employer Hach Rose Schirripa & Cheverie Occupation attorney

Receipt For: 2026  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 25 / 2026

Transaction ID : SA13A.4814

Amount of Each Receipt this Period  
150000.00

Memo Item

**B.** 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

**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)..... ▶

150000.00

150000.00

**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 15 OF 31			
	<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				

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial) <b>A. CSC Capital LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2026
Mailing Address 38 Condon Road		FEC Identification Number C
City Stillwater	State NY	Zip Code 12170
Purpose of Disbursement fundraising consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4500.00	
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) ▼	<b>Transaction ID : SB17.4763</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CSC Capital LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 17 / 2026
Mailing Address 38 Condon Road		FEC Identification Number C
City Stillwater	State NY	Zip Code 12170
Purpose of Disbursement fundraising consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4500.00	
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) ▼	<b>Transaction ID : SB17.4766</b>
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. CSC Capital LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2026
Mailing Address 38 Condon Road		FEC Identification Number C
City Stillwater	State NY	Zip Code 12170
Purpose of Disbursement fundraising consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4500.00	
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) ▼	<b>Transaction ID : SB17.4782</b>
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	13500.00
<b>TOTAL</b> 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

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial) <b>A. Express Canvassing, LLC</b>			Date of Disbursement MM / DD / YYYY 03 / 02 / 2026		
Mailing Address 11805 Watts Court			FEC Identification Number C		
City Tavares	State LA	Zip Code 32778	Amount of Each Disbursement this Period 28120.00		
Purpose of Disbursement ballot access canvassing		Category/ Type	Transaction ID : SB17.4774		
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>B. Express Canvassing, LLC</b>			Date of Disbursement MM / DD / YYYY 03 / 19 / 2026		
Mailing Address 11805 Watts Court			FEC Identification Number C		
City Tavares	State LA	Zip Code 32778	Amount of Each Disbursement this Period 36250.00		
Purpose of Disbursement ballot access canvassing		Category/ Type	Transaction ID : SB17.4799		
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>C. Express Canvassing, LLC</b>			Date of Disbursement MM / DD / YYYY 03 / 26 / 2026		
Mailing Address 11805 Watts Court			FEC Identification Number C		
City Tavares	State LA	Zip Code 32778	Amount of Each Disbursement this Period 13125.00		
Purpose of Disbursement ballot access canvassing		Category/ Type	Transaction ID : SB17.4800		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	77495.00
<b>TOTAL</b> 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 17 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial) <b>A. Express Canvassing, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2026
Mailing Address 11805 Watts Court		FEC Identification Number C
City Tavares	State LA	Zip Code 32778
Purpose of Disbursement ballot access canvassing		Amount of Each Disbursement this Period 26421.00
Candidate Name		Transaction ID : SB17.4818
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>B. Harris Media, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2026
Mailing Address 66 W. Flagler Street Unit PH-1		FEC Identification Number C
City Miami	State FL	Zip Code 33130
Purpose of Disbursement advertising/website/consulting		Amount of Each Disbursement this Period 15913.60
Candidate Name		Transaction ID : SB17.4754
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>C. Harris Media, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2026
Mailing Address 66 W. Flagler Street Unit PH-1		FEC Identification Number C
City Miami	State FL	Zip Code 33130
Purpose of Disbursement advertising/website/consulting		Amount of Each Disbursement this Period 8104.07
Candidate Name		Transaction ID : SB17.4764
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	50438.67
<b>TOTAL</b> 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 18 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial) <b>A. Harris Media, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2026
Mailing Address 66 W. Flagler Street Unit PH-1		FEC Identification Number C
City Miami	State FL	Zip Code 33130
Purpose of Disbursement advertising/website/consulting		Amount of Each Disbursement this Period 5469.46
Candidate Name		Transaction ID : SB17.4776
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>B. Law Office of Aaron S. Foldenauer</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2026
Mailing Address 30 Wall Street, 8th Floor		FEC Identification Number C
City New York	State NY	Zip Code 10005
Purpose of Disbursement legal fees		Amount of Each Disbursement this Period 10000.00
Candidate Name		Transaction ID : SB17.4771
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>C. Robert Watkins &amp; Company. P.A.</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2026
Mailing Address 610 S. Boulevard		FEC Identification Number C
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement accounting services		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : SB17.4751
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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18469.46
<b>TOTAL</b> 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

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robert Watkins &amp; Company. P.A.</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2026
Mailing Address 610 S. Boulevard		FEC Identification Number C
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement accounting services		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : SB17.4761
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>B. Robert Watkins &amp; Company. P.A.</b>		Date of Disbursement MM / DD / YYYY 03 / 02 / 2026
Mailing Address 610 S. Boulevard		FEC Identification Number C
City Tampa	State FL	Zip Code 33606
Purpose of Disbursement accounting services		Amount of Each Disbursement this Period 3000.00
Candidate Name		Transaction ID : SB17.4772
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>C. The November Team</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2026
Mailing Address P. O. Box 99		FEC Identification Number C
City South Salem	State NY	Zip Code 10590
Purpose of Disbursement communications consulting		Amount of Each Disbursement this Period 6000.00
Candidate Name		Transaction ID : SB17.4753
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12000.00
<b>TOTAL</b> 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 20 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. The November Team</b>		M M / D D / Y Y Y Y 02 / 03 / 2026	
Mailing Address P. O. Box 99		FEC Identification Number	
City South Salem	State NY	Zip Code 10590	<b>C</b>
Purpose of Disbursement communications consulting		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			6000.00
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<b>Transaction ID : SB17.4762</b>
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. The November Team</b>		M M / D D / Y Y Y Y 03 / 26 / 2026	
Mailing Address P. O. Box 99		FEC Identification Number	
City South Salem	State NY	Zip Code 10590	<b>C</b>
Purpose of Disbursement communications consulting		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			6000.00
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<b>Transaction ID : SB17.4801</b>
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. The Waverly Group</b>		M M / D D / Y Y Y Y 01 / 07 / 2026	
Mailing Address 1931 E. Cumberland Street		FEC Identification Number	
City Philadelphia	State PA	Zip Code 19125	<b>C</b>
Purpose of Disbursement campaign consulting		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			5000.00
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<b>Transaction ID : SB17.4752</b>
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17000.00
<b>TOTAL</b> 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

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A. The Waverly Group</b>		M M / D D / Y Y Y Y 02 / 06 / 2026	
Mailing Address 1931 E. Cumberland Street		FEC Identification Number	
City Philadelphia	State PA	Zip Code 19125	<b>C</b>
Purpose of Disbursement campaign consulting		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			5000.00
Office Sought:	Disbursement For:	Transaction ID : SB17.4765	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼		
<input type="checkbox"/> President			
State:                  District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B. The Waverly Group</b>		M M / D D / Y Y Y Y 03 / 03 / 2026	
Mailing Address 1931 E. Cumberland Street		FEC Identification Number	
City Philadelphia	State PA	Zip Code 19125	<b>C</b>
Purpose of Disbursement campaign consulting		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			5000.00
Office Sought:	Disbursement For:	Transaction ID : SB17.4777	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼		
<input type="checkbox"/> President			
State:                  District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C. WinRed Technical Services, LLC</b>		M M / D D / Y Y Y Y 01 / 02 / 2026	
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number	
City Arlington	State VA	Zip Code 22209	<b>C</b>
Purpose of Disbursement processing fees		Category/ Type	Amount of Each Disbursement this Period
Candidate Name			15.34
Office Sought:	Disbursement For:	Transaction ID : SB17.4733	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Memo Item	
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼		
<input type="checkbox"/> President			
State:                  District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10015.34
<b>TOTAL</b> 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 22 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial) <b>A. WinRed Technical Services, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 3.71
Candidate Name		Transaction ID : SB17.4743
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>B. WinRed Technical Services, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 4.10
Candidate Name		Transaction ID : SB17.4755
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>C. WinRed Technical Services, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 2.06
Candidate Name		Transaction ID : SB17.4783
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9.87
<b>TOTAL</b> 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 23 OF 31			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial) <b>A. WinRed Technical Services, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 10.25
Candidate Name	Category/Type	Transaction ID : SB17.4767
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>B. WinRed Technical Services, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 04 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 3.08
Candidate Name	Category/Type	Transaction ID : SB17.4833
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>C. WinRed Technical Services, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 4.10
Candidate Name	Category/Type	Transaction ID : SB17.4834
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17.43
<b>TOTAL</b> 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 24 OF 31	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial) <b>A. WinRed Technical Services, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 3.94
Candidate Name	Category/ Type	Transaction ID : SB17.4778
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>B. WinRed Technical Services, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 10.25
Candidate Name	Category/ Type	Transaction ID : SB17.4790
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WinRed Technical Services, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 18 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 1.03
Candidate Name	Category/ Type	Transaction ID : SB17.4794
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15.22
<b>TOTAL</b> 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 25 OF 31			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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)  
**Hach for Congress**

Full Name (Last, First, Middle Initial) <b>A. WinRed Technical Services, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 27 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 125.10
Candidate Name	Category/Type	Transaction ID : SB17.4802
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>B. WinRed Technical Services, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 59.91
Candidate Name	Category/Type	Transaction ID : SB17.4809
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>C. WinRed Technical Services, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2026
Mailing Address 1776 Wilson Boulevard #530		FEC Identification Number C
City Arlington	State VA	Zip Code 22209
Purpose of Disbursement processing fees		Amount of Each Disbursement this Period 51.70
Candidate Name	Category/Type	Transaction ID : SB17.4821
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	236.71
<b>TOTAL</b> This Period (last page this line number only).....▶	199197.70

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Hach for Congress** Transaction ID : **SC/10.4104**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2024
Hach, Gregory, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 338 Jericho Pkwy. #212			<input type="checkbox"/> General
City		State	ZIP Code
Syosset		NY	11791
			<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50.00	0.00	50.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	08 / 08 / 2023	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	50.00
<b>TOTALS</b> 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) **Hach for Congress** Transaction ID : **SC/10.4105**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2024
Hach, Gregory, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 338 Jericho Pkwy. #212			<input type="checkbox"/> General
City		State	ZIP Code
Syosset		NY	11791
			<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
199950.00	0.00	199950.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 08 / 10 / 2023	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	199950.00
<b>TOTALS</b> 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) **Transaction ID : SC/10.4522**  
 Hach for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2024
Hach, Gregory, , ,		<input checked="" type="checkbox"/> Primary
Mailing Address 338 Jericho Pkwy. #212		<input type="checkbox"/> General
City		<input type="checkbox"/> Other (specify) ▼
Syosset	State NY	<input checked="" type="checkbox"/> Personal Funds of the Candidate
ZIP Code 11791		

Original Amount of Loan 475000.00	Cumulative Payment To Date 465000.00	Balance Outstanding at Close of This Period 10000.00
--------------------------------------	---	---

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 02 / 21 / 2024	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	Amount Guaranteed Outstanding: <input type="text"/>
State	
ZIP Code	
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	Amount Guaranteed Outstanding: <input type="text"/>
State	
ZIP Code	
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	Amount Guaranteed Outstanding: <input type="text"/>
State	
ZIP Code	
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City	Amount Guaranteed Outstanding: <input type="text"/>
State	
ZIP Code	

<b>SUBTOTALS</b> This Period This Page (optional).....▶	<input type="text" value="10000.00"/>
<b>TOTALS</b> This Period (last page in this line only).....▶	<input type="text"/>

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) **Hach for Congress** Transaction ID : **SC/10.4651**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
Hach, Gregory, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 338 Jericho Pkwy. #212			<input type="checkbox"/> General
City		State	ZIP Code
Syosset		NY	11791
			<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 20 / 2025	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	250000.00
<b>TOTALS</b> 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) **Hach for Congress** Transaction ID : **SC/10.4652**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
Hach, Gregory, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 338 Jericho Pkwy. #212			<input type="checkbox"/> General
City		State	ZIP Code
Syosset		NY	11791
			<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 23 / 2025	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	100000.00
<b>TOTALS</b> 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) **Hach for Congress** Transaction ID : **SC/10.4814**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)		<input type="checkbox"/> Memo Item	Election: 2026
Hach, Gregory, , ,			<input checked="" type="checkbox"/> Primary
Mailing Address 338 Jericho Pkwy. #212			<input type="checkbox"/> General
City		State	ZIP Code
Syosset		NY	11791
			<input checked="" type="checkbox"/> Personal Funds of the Candidate

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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 03 / 25 / 2026	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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	150000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	710000.00

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